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ABSTRACT

Inclusion is the practice of educating children who have disabilities in classes together with their peers who do not have disabilities. This packet on "least intervention" contains resource materials that help ensure appropriate inclusion. The first section of this packet contains discussions of appropriate inclusion and a description of the approach taken by one school district toward the "least restrictive environment." A second section contains an overview of some basic resources. These include selected references and lists of agencies, organizations, Internet sites, and experts as potential sources of help. A resource aid prepared by the Clearinghouse of the Center for Mental Health in Schools discusses parental consent and due process as safeguards in determining student placement. A section on model programs describes seven programs for assuring appropriate inclusion. Another section describes modules for staff development in inclusion practices that was developed by the Kansas Project for the Utilization of Full Inclusion and downloaded from the Project's Web site. A digest from the Educational Resources Information Center (ERIC), "Including Students with Disabilities in General Education Classrooms," is presented as an example of the resources available from ERIC. "Inclusion: Some Issues" provides excerpts from a special edition of "Education and Urban Society,"(v27 n4 Aug 1995). A section titled "Using Existing Supports in Inclusive Classrooms and Schools" contains information on natural support categories and strategies" from the article "The Time-Space Continuum: Using Natural Support in Inclusive Classrooms" by Mey Grigal ("Teaching Exceptional Children," n30 p44-51 1998). Also included in this section is an outline of the range of interveners who can play a role in ensuring effective inclusion and a worksheet to identify how available staff can be used to cover basic areas of concern related to schoolwide approaches to inclusion. A final essay, "Beyond Placement in the Least Restrictive Environment: The Concept of Least Intervention Needed and the Need for a Continuum of Community-School Programs/Services" from the Center for Mental Health in Schools, summarizes the issues involved in appropriate inclusion. (SLD)

ED 425 239

Mental Health in Schools Center
Training and Technical Assistance

*From the Center's Clearinghouse ...**

An introductory packet on:

Least Intervention Needed: Toward Appropriate Inclusion of Students with Special Needs

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TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

* The Center is co-directed by Howard Adelman and Linda Taylor and operates under the auspices of the School Mental Health Project, Dept. of Psychology, UCLA, Los Angeles, CA 90095-1563 -- Phone: (310) 825-3634.

Support comes in part from the Department of Health and Human Services, Public Health Service, Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health.

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UCLA CENTER FOR MENTAL HEALTH IN SCHOOLS*

Under the auspices of the School Mental Health Project in the Department of Psychology at UCLA, our center approaches mental health and psychosocial concerns from the broad perspective of addressing barriers to learning and promoting healthy development. Specific attention is given policies and strategies that can counter fragmentation and enhance collaboration between school and community programs.

MISSION: *To improve outcomes for young people by enhancing policies, programs, and practices relevant to mental health in schools.*

Through collaboration, the center will

- **enhance practitioner roles, functions and competence**
- **interface with systemic reform movements to strengthen mental health in schools**
- **assist localities in building and maintaining their own infrastructure for training, support, and continuing education that fosters integration of mental health in schools**

Consultation Cadre ***Clearinghouse***

Newsletter ***National & Regional Meetings***

Electronic Networking

Guidebooks ***Policy Analyses***

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*In 1996, two national training and technical assistance centers focused on mental health in schools were established with partial support from the U.S. Department of Health and Human Services, Public Health Service, Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health. As indicated, one center is located at UCLA; the other is at the University of Maryland at Baltimore and can be contacted toll free at 1-(888) 706-0980.

(1/98)

What is the Center's Clearinghouse?

The scope of the Center's Clearinghouse reflects the School Mental Health Project's mission -- to enhance the ability of schools and their surrounding communities to address mental health and psychosocial barriers to student learning and promote healthy development. Those of you working so hard to address these concerns need ready access to resource materials. The Center's Clearinghouse is your link to specialized resources, materials, and information. The staff supplements, compiles, and disseminates resources on topics fundamental to our mission. As we identify what is available across the country, we are building systems to connect you with a wide variety of resources. Whether your focus is on an individual, a family, a classroom, a school, or a school system, we intend to be of service to you. Our evolving catalogue is available on request; eventually it will be accessible electronically over the Internet.

What kinds of resources, materials, and information are available?

We can provide or direct you to a variety of resources, materials, and information that we have categorized under three areas of concern:

- Specific psychosocial problems
- Programs and processes
- System and policy concerns

Among the various ways we package resources are our *Introductory Packets, Resource Aid Packets, special reports, guidebooks*, and *continuing education units.* These encompass overview discussions of major topics, descriptions of model programs, references to publications, access information to other relevant centers, organizations, advocacy groups, and Internet links, and specific tools that can guide and assist with training activity and student/family interventions (such as outlines, checklists, instruments, and other resources that can be copied and used as information handouts and aids for practice).

Accessing the Clearinghouse

- E-mail us at **smhp@ucla.edu**
- FAX us at (310) 206-8716
- Phone (310) 825-3634
- Write School Mental Health Project/Center for Mental Health in Schools, Dept. of Psychology, Los Angeles, CA 90095-1563

Check out recent additions to the Clearinghouse on our Web site
http://smhp.psych.ucla.edu

All materials from the Center's Clearinghouse are available for a minimal fee to cover the cost of copying, handling, and postage. Eventually, we plan to have some of this material and other Clearinghouse documents available, at no-cost, on-line for those with Internet access.

If you know of something we should have in the clearinghouse, let us know.

Least Intervention Needed: Toward Appropriate Inclusion of Students with Special Needs

"Of course, there are limits to what different people are capable of achieving, but we should make no uninformed assumptions about what these limits are."
Stevenson & Stigler, 1992

This Introductory Packet contains: **Page**

- **A Discussion of : Least Intervention Needed**
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WHAT IS INCLUSION?

"Inclusion is the practice of educating children who have disabilities in classes together with their nondisabled peers. Although the term "inclusion" does not appear in any federal law, it has unified efforts to broaden educational opportunities under three different federal laws. Some efforts have used the language of the Individuals with Disabilities Education Act, which requires that children be educated in the "least restrictive environment" with whatever supplementary aids and services are needed so that the child can benefit. Others have used the language of regulations implementing Section 504 of the Rehabilitation Act, which gives a preference to the school and classroom the child would otherwise attend if not disabled. The Americans with Disabilities Act has similar provisions. Recent federal court decisions in New Jersey and California have interpreted the law to mean that even children with severe disabilities must, in most circumstances, be included in their local school classrooms with nondisabled peers.

. . . whether or not one agrees with those who advocate inclusion, the practice is spreading so rapidly that practical need usually compels educators to inform themselves about what inclusion is and how it is done."

Some programs are no more than nominally inclusive. For example:

1) cluster-site programming, where all the children with disabilities from a wide geographic area are brought to a single school and 'included' in that school's classes;

2) traditional mainstream programming, where children with disabilities can attend classes with their nondisabled peers only if they can 'keep up' with their classmates' level of performance, and

3) 'dumping,' where children with disabilities are simply placed in general-education classrooms without supportive services.

A truly inclusive program is one that ensures each special education student is "provided with specially designed instruction to meet his or her unique needs. However, unlike 'traditional' special-education models, instead of sending the children to a specialized site . . . the children remain in the schools and classes they would otherwise attend, and the services are brought to them. "

From J. R. Rogers' (1994) Introduction to *Inclusion: Moving Beyond Our Fears.* One of the *Hot Topics Series* published by Phi Delta Kappa's Center for Evaluation, Development, and Research.

Least Intervention Needed: Toward Appropriate *Inclusion* of Students with Special Needs

Society defines what is exceptional or deviant, and appropriate treatments are designed quite as much to protect society as they are to help the child.... "To take care of them" can and should be read with two meanings: to give children help and to exclude them from the community.
Nicholas Hobbs, 1975

Appropriate inclusion of students with special needs begins with ensuring that only those who cannot be helped effectively in the mainstream are referred to special placements.

When data indicate that a person is not making appropriate progress, whatever the cause, the tendency is to consider use of special services and placements. Such a decision often includes the profound move of transferring an individual out of a mainstream setting into a special environment.

The decision usually is based on whether the person's problem is viewed as mild to moderate or severe and pervasive, and whether it is related to learning, behavior, emotional, or physical functioning. Persons with severe and pervasive problems often are placed in specialized treatment settings such as remedial classrooms and institutions. Mild to moderate problems are supposed to be dealt with in mainstream settings -- either through modifying the setting somewhat or adding extra (ancillary) services or both.

Ancillary assistance can involve a variety of interventions: (1) extra instruction such as tutoring, (2) enrichment opportunities such as pursuit of hobbies, arts and crafts, and recreation, (3) psychologically oriented treatments such as individual and family therapy, and (4) biologically oriented treatments such as medication. Placement decisions focus first on major intervention needs, then on which, if any, extra assistance seems indicated. In many cases, decisions about secondary ancillary activity are best made after primary interventions are given an adequate trial and found insufficient.

*The material included has been abstracted from H.S. Adelman & L. Taylor *(1993). Learning Problems and Learning Disabilities: Moving Forward.* Pacific Grove, CA: Brooks/Cole.

One School District's
Approach to
Least Intervention Needed

Information for Parents on Least Restrictive Environment

What Does Least Restrictive Environment Mean for Your Child?

The District's policy is that students with disabilities should be educated on general education school sites if at all possible and that they should be provided services and support as appropriate. Decisions about where a student attends school are based on the student's needs and not on the type or severity of the student's disability.

Why is Least Restrictive Environment Important?

By attending school on a general education campus, students with disabilities have the right to participate in academic, nonacademic, and extra-curricular activities. These activities include use of the cafeteria and playground and participation in assemblies, field trips, social activities, and graduation activities. Students with disabilities will also have the opportunity to develop friendships with their non-disabled peers.

What are the Different Placement Options?

Most students with disabilities should attend general education school sites. They may be in a regular class full time. Some may receive additional help from a special teacher for speech or adapted physical education, etc. Others may be assigned to a special education Resource Specialist Program for part of the day or they may be in a Special Day Class for most of the day. Some students attend special education centers and others may go to a nonpublic or residential school, when appropriate. A few receive instruction in the home or in the hospital.

How is the Least Restrictive Environment Determined?

The least restrictive environment for your child will be discussed at each IEP* team meeting. It is important that you attend, if at all possible, so that you can participate fully as a member of the IEP team. The IEP team will determine whether:

1. The student should be placed in an age-appropriate general education classroom. For this type of placement, supplemental aids and services, such as adaptation of the curriculum, will be determined at the IEP team meeting.
2. The student should participate in the Resource Specialist Program or attend a Special Day Class on a general education school site. Integration into general education classes and activities will also be specified on the IEP.

If the IEP team determines that placement at a special school site is necessary, the IEP will include the reasons why. For students transitioning back to a general education school, the IEP will include a transition timeline and support activities.

*IEP is Individualized Education Program

Please note: For additional information on Least Restrictive Environment you may request a copy of Bulletin No. 49 from the Los Angeles Unified School District/Division of Special Education.

INCLUSION

The benefits and costs of the policy of **inclusion** are explored in a PBS *Merrow Report* entitled "What's So Special About Special Education?" To underscore just how hard it is to turn inclusion policies into practice, the program focuses on two children in the Denver schools.

> One student, Darcy, is diagnosed as autistic. She hits others and is hard for her teacher to handle. Her parents want her kept in regular classes because they believe special education classes have lower expectations and will fail to develop the child to her full ability. School officials argue that the girl is becoming too disruptive.

The second student, Tara, has Down Syndrome, and her mother wants her in special classes with teachers who are specially trained. In regular classes, she argues her child is given short shrift. She is convinced that keeping her in the mainstream is unrealistic.

As a program review in *The New York Times* notes:

> This thoughtful report brings home just how much is expected of schools. For example, supporters of inclusion say that being in a classroom with a handicapped child is good for the other pupils, and Mr. Merrow's interviews with two of Darcy's classmates do indicate that being with her every day has made them more understanding. But Tara's mother says that although her daughter's classmates were not unkind, they never included her in their games. And Albert Shanker, president of the American Federation of Teachers, cautions against emphasizing socialization at the expense of the school's academic mission. [The program] draws attention to the difficulties of making educational policy where children's needs, parents' expectations, teachers' limitations and school budgets are bound to collide.

A Quick Overview of Some Basic Resources

A. Selected References

B. Agencies, Organizations and Internet Sites

C. Names from Our Consultation Cadre

D. Resource Aid: Parental Consent and Due Process

A. Selected References for Appropriate Inclusion of Children with Special Needs

I. Educational Planning and Transitions

Inclusive and Heterogeneous Schooling: Assessment, Curriculum, and Instruction.
Falvey, M.A. (Ed.) (1995). Baltimore, MD: Paul Brookes Publishing Co.

Choosing Options and Accommodations for Children (COACH): A Guide to Planning Inclusive Education.
Giangreco, M.F., Cloninger, C.J., & Iverson, V.S. (1993). Baltimore, MD: Paul H. Brookes.

The Time-Space Continuum: Using Natural Supports in Inclusive Classrooms.
Grigal, M. (1998). *Teaching Exceptional Children, 30,* 44-51.

Creating Inclusive School Communities: A Staff Development Series for General and Special Educators.
York-Barr, J., Kronberg, R., & Doyle, M.B.(1996). Baltimore, MD: Paul H. Brookes.

Technology for Inclusion: Meeting the Special Needs of All Students.
Male, M. (1994). Boston: Allyn and Bacon.

Section 504 in the Classroom: How to Design and Implement Accommodation Plans With Forms.
Miller, L., & Newbill, C. (1998). Austin, TX : Pro Ed.

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Restructuring for Caring and Effective Education: An Administration Guide to Creating Heterogenous Schools.
Villa, R.A., Thousand, J.S., Stainbeck, W., & Stainback, S. (Eds.) (1992). Baltimore, MD: Paul H. Brookes.

Facilitating Special Students' Transition Within the School.
Wood, J.W. & Beale, A.V. (1991). *Elementary School Guidance & Counseling, 25,* 261-268.

Creating Schools for All Our Students: What 12 Schools Have to Say.
Working Forum on Inclusive Schools (1994). Reston, VA: Council for Exceptional Children.

II. Getting the Broad Perspective: General Policy Concerns

Inclusion Confusion: A Guide to Educating Students with Exceptional Needs.
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Inclusion: Are We Abandoning or Helping Students?
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Effectiveness of Special Education: Is Placement the Critical Factor?
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The Illusion of Full Inclusion: A Comprehensive Critique of a Current Special Education Bandwagon.
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Full Inclusion and the Education of Children and Youth with Emotional and Behavioral Disorders.
Lewis, T.J., Chard, D., & Scott, T.M. (1994). *Behavioral Disorders, 19*, 277-293.

Social Constructivist Theory and Principles of Inclusion: Challenges for Early Childhood Special Education.
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Inclusion : Rhetoric and Reality.
Marti, E.W. (1994, April). *Exceptional Parents, 24*(2), 39-42.

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McLaughlin, M.J., & Warren, S.H. (1994, June). Palo Alto, CA: Center for Special Education Finance.

The Costs of Inclusion.
McLaughlin, M.J., & Warren, S.H. (1994, November). *The School Administrator, 2* (1), 8-19.

Integrating Students with Special Needs: Policies and Practices That Work.
NEA Professional Standards and Practices. (1993). Washington, DC: National Education Association.

Educating Children with Multiple Disabilities: A Transdiciplinary Approach (2nd ed.)
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Leadership in Educational Reform: An Administrator's Guide to Changes in Special Education.
Sage, D.D., & Burrello, L.C. (1994). Baltimore, MD: Paul H. Brookes.

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Salisbury, C., & Chambers, A. (1994). *The Journal of the Association of Persons with Severe Handicaps, 19*(3), 215-222.

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Controversial Issues Confronting Special Education: Divergent Perspectives (2nd ed.)
Stainbeck, W. & Stainbeck, S. (Eds.) (1996). Boston: Allyn and Bacon.

An Exploration of the Meaning and Practice of Special Education in the Context of Full Inclusion of Students with Learning Disabilities.
Zigmond, N. (1995). *Journal of Special Education, 29*, 109-115.

III. Legal Issues

Appropriate Placement of Students with Emotional or Behavioral Disorders: Emerging Policy Options.
Leone, P.E. & McLaughlin, M.J. (1995). In J.M. Kauffman, J.W. Lloyd, D.P. Hallahan & T.A. Astuto, (Eds.), *Issues in Educational Placement: Students with Emotional and Behavioral Disorders* (pp. 335-359). Hillsdale, NJ: Lawrence Erlbaum Associates, Inc.

Clyde K. and Sheila K. v. Puyallup School District: The Courts, Inclusion, and Students with Behavioral Disorders.
Yell, M.L. (1995). *Behavioral Disorders, 20*, 179-189.

Least Restrictive Environment, Inclusion, and Students with Disabilities: A Legal Analysis.
Yell, M.L. (1995). *Journal of Special Education, 28*, 389-404.

IV. Model Programs and Systemic Concerns

Education for Adolescents with Disabilities: Curriculum and Placement Issues.
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Fostering Inclusive Schools and Communities: A Public Relations Guide.
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A Consulting Model for Providing Integration Opportunities for Preschool Children with Disabilities.
Hanline, M.F. (1990). *Journal of Early Intervention, 14*, 360-366.

School-Based Approaches for Children with Emotions and Behavioral Problems: Research and Practice in Service Integration.
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Bridging Special and Regular Education: The Pennsylvania Initiative.
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Nisbet, J.A., Jorgensen, C. & Power, S. (1994). In Bradeley, V.J. , Ashbaugh, J.W., Blaney, B.C., (Eds.), *Creating Individual Supports for People with Developmental Disabilities: A Mandate for Change at Many Levels* (pp. 213-236). Baltimore, MD: Paul H. Brookes Publishing Co.

Collaborative Teams for Students with Severe Disabilities: Integrating Therapy and Education Services.
Rainforth, B., York, J., & Macdonald, C. (1992). Baltimore, MD: Paul H. Brookes.

Organizational, Instructional, and Curricular Strategies to Support the Implementation of Unified, Coordinated, and Inclusive Schools.
Schrag, J.A. (1994). Reston, VA: Council for Exceptional Children.

Responsible Inclusion for Students with Learning Disabilities.
Vaughn, S. & Schumm, J. S. (1995). *Journal of Learning Disabilities, 28*, 264-270.

V. Teacher, Student, and Parent Issues

Ideas for Inclusion : The Classroom Teacher's Guide to Integrating Students with Severe Disabilities.
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Making School Inclusion Work : A Guide to Everyday Practices.
Blenk, K., & Fine, D.L. (1995). Cambridge, MA: Brookline.

The Integration of Students with Severe or Profound Disabilities from Segregated Schools into Regular Public Schools: An Analysis of Changes in Parent Perceptions.
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Figuring Out What to Do with the Grown-Ups: How Teachers Make Inclusion "Work" for Students with Disabilities.
Ferguson, D.L., Meyer, G., Jeanchild, L., Juniper, L., & Zingo, J. (1992). *The Journal of the Association of Persons with Severe Disabilities, 17*, 218-226.

Helping and Hovering? Effects of Instructional Assistant Proximity on Students with Disabilities.
Giangreco, M.F., Edelman, S.W., Luiselli, T. E., & MacFarland, S.Z.C. (1997). *Exceptional Children, 64*(1), 7-18.

Experiences of Classroom Teachers Integrating Students with Moderate and Severe Disabilities.
Janzen, L., Wilgosh, L. & McDonald, L. (1995). *Developmental Disabilities Bulletin, 23*, 40-57.

Natural Supports in Inclusive Schools: Curricular and Teaching Strategies.
Jorgensen, C.M. (1992). In J. Nisbet (Ed.), *Natural Support in School, at Work, and in the Community for People with Severe Disabilities*. Baltimore: Paul H, Brookes.

Perceptions of Parents, Teachers, and Students Regarding an Integrated Education Inclusion Program.
Lombardi, T.P., Nuzzo, D.L., Kennedy, K.D. & Foshay, J. (1994). *High School Journal, 77*, 315-321.

Cooperative Learning and Strategies for Inclusion: Celebrating Diversity in the Classroom.
Putnam, J.W. (1993). Baltimore: Paul H. Brookes.

Unlocking the Door: A Parents' Guide to Inclusion.
Rebhorn, T., & Takemoto, C. (1994). Fairfax, VA: Parent Educational Advocacy Training Center.

Winning Ways: Creating Inclusive Schools, Classrooms, and Communities.
Roach, V., Ascroft, J., & Stamp, A. (1995, May). Alexandria, VA: National Association of State Boards of Education.

Secondary Classes Can Be Inclusive Too.
Schuhmaker, J. B. & Deshler, D.D. (1995, December/January).*Educational Leadership. 52*(4), 50-51.

Mainstreaming Exceptional Students: A Guide for Classroom Teachers (4th ed.).
Schultz, J.B., & Carpenter, C.D. (1994) . Boston: Allyn and Bacon.

Support Networkers for Inclusive Schooling: Interdependent Integrated Education.
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Changes in Latitudes, Changes in Attitudes: The Role of the Inclusion Facilitator.
Tashie, C., Shapiro-Barnard, S., Dillon, A.D., Schuh, M., Jorgensen, C., & Nisbet, J. (1993). Concord, NH: Institute on Disability, University of New Hampshire.

Inclusive Education for Learners with Disabilities: Print and Media Resources.
Vandercook, T., Walz, L., Doyle, M.B., York, J.L., & Wolff, S. (1995). Minneapolis, MN: Institute on Community Integration, University of Minnesota.

Experienced Teachers' Perceptions of Resources and Supports for Inclusion.
Wolery, M., Werts, M.G., Caldwell, N.K., Snyder, E.D., et al. (1995). *Education & Training in Mental Retardation & Developmental Disabilities, 30*, 15-26.

Facilitator Guides to Inclusive Education.
WRRC (1994). Detroit, MI: Inclusive Communities Press.

Issues Raised in the Name of Inclusion: Perspectives of Educators, Parents, and Students.
York, J. & Tunidor, M. (1995). *Journal of the Association for Persons with Severe Handicaps, 20*, 31-44.

VI. Brief Research Syntheses Available from the ERIC Clearinghouses.

A variety of useful documents prepared by the ERIC Clearinghouses are available in libraries, over the Internet, or directly from the Educational Resources Information Center (ERIC) by phone, 1-800-LET-ERIC.

For information on searching for and accessing ERIC documents over the Internet, see the Internet Resources section of this introductory packet.

The following is a brief sampling of ERIC Digests (research syntheses) and documents related to transition, inclusion, and mainstreaming.

An example of a complete digest is at the end of this sample packet.

Annotated Lists of Resource and Articles

- 1995 ED 381 960 A Secondary School's Experience: Is it Inclusion or is it School Reform?
- 1995 ED 381 322 Including General Educators in Inclusion
- 1995 ED 381 344 Inclusion: The Results of Attendance, Achievement, and Self-Concept in a Class-Within-a-Class Model
- 1994 ED 372 562 Making decisions about the inclusion of students with disabilities in large-scale assessments: A report on a working conference to develop guidelines on inclusion and accommodations
- 1994 ED 372 573 Inclusion: An annotated bibliography

- 1994 ED 381 941 Resources for Special Education and Guidance & Counseling: An Annotated List
- 1994 ED 382 335 Inclusion Plus Collaborative Teaching Equals Success in Early Childhood
- 1993 ED 358 616 Interaction of students with special needs into educational settings: An annotated bibliography.
- 1992 ED 344 418 Examples of curricular adaptations for students with sever disabilities in the elementary classrooms
- 1992 ED 354 685 Curricular adaptations: Accommodating the instructional needs of diverse learners in the context of general education
- 1992 ED 358 635 Effective practices for inclusive programs: A technical assistance planning guide
- 1992 ED 365 025 Kids talk about inclusive classrooms
- 1992 ED 365 050 School restructuring and full inclusion

A Special Resource.

Utah's Project for Inclusion (UPI)

Promoting quality inclusion for all

The goals of this project are

(1) to assist school districts who are proactively committed to quality inclusive education in neighborhood schools in using district resources and expertise to develop effective programs for inclusion

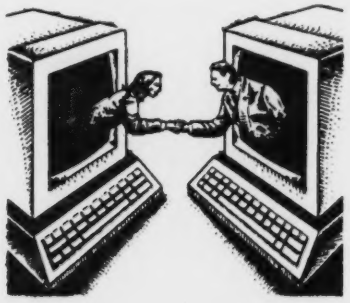
(2) to serve as a resource for all administrators, educators, family members, and others related to effective inclusionary education in neighborhood schools.

UPI works intensively with individual schools and school districts to meet the needs of all students -- addressing concerns about functional curriculum, relationships among programs, networking, and so forth. The effort focuses on all students including those for whom English is a second language and those designated as gifted and talented.

Contact: Tim McConnell, Project Director, Utah State Office of Education, SARS, 250 East 500 South, Salt Lake City, Utah 84111 Phone: 801-538-7568

Web: http://www.usoe.k12.ut.us/sars/inclusion/inclusion.html

B. Agencies, Organizations, and Internet Sites Specializing in Assistance Related to Transition, Inclusion, and Mainstreaming



There are many agencies and organizations that help and advocate for those with disabilities. The following is a list of advocacy, agencies, organizations and sites on the World Wide Web that offer information and resources related to special education in general, and, in some cases, to inclusion specifically. This list is not a comprehensive list, but is meant to highlight some premier resources and serve as a beginning for your search. Also, at the end of this section is a guide to using the ERIC Clearinghouses on the Internet.

The Internet is a useful tool for finding some basic resources. For a start, try using a search engine such as Yahoo and typing in the words "inclusion", "mainstreaming" or "inclusion and learning disabilities". "Transition" is probably too general. Frequently if you find one useful Webpage it will have links to other organizations with similar topics of research.

American Foundation for the Blind (AFB)

11 Penn Plaza, Suite 300
New York, NY 10001
Tel:(212) 502-7600
E-mail: afbinfo@afb.org
Web: http://www.afb.org

A national non-profit organization whose mission is to enable people who are blind or visually impaired to achieve equality of access and opportunity. The website includes a discussion of inclusion.

Building Inclusive Communities (BIC)

Laverne Lund, Acting Regional Administrator, BIC Administrator
E-Mail: LRL3@aol.com
http://ftp.milwaukee.k12.wi.us/departments/bicp/

The Building Inclusive Communities project has developed a systematic approach to strengthen the success network for all students and adults within our educational community as we work to improve inclusive education.

Center for Effective Collaboration and Practice

David Osher, Director
Improving Services for Children and Youth with Emotional and Behavioral Problems
1000 Thomas Jefferson Street, NW, Suite 400
Washington, DC 20007
Tel: (202) 944-5400 / Fax: (202) 944-5455
E-mail: center@air-dc.org
Web: http://www.air-dc.org/cecp/cecp.html

The Center supports and promotes a reoriented national preparedness to foster the development, achievement, and adjustment of children with or at risk of developing serious emotional disturbance. The Center supports the identification, production, exchange, and use of knowledge to enhance the capacity of those involved with children and youth with emotional and behavioral problems to develop, implement, and sustain effective practices, programs, and policies.

Center for Minority Research in Special Education (COMRISE)

University of Virginia, Curry School of Education
405 Emmet Street
Charlotte, VA 22903
Tel: (804) 924-1022 / (804) 982-HEAR
Fax: (804) 924-0747
Web: http://curry.edschool.virginia.edu/go/comrise

The COMPRISE works to increase the number and research capacity of minority scholars in institutions of higher education with high minority enrollments; build a community of minority scholars within the larger special education research community; improve the quality and effectiveness of culturally competent special education services for minority students.

Center for Special Education Finance (CSEF)

Jay Chambers/ Thomas Parrish, Co-directors
American Institutes for Research
1791 Arastrado Road
P.O. Box 113
Palo Alto, Ca. 94302
Tel: (650) 493-3550 / Fax: (650) 858-0958
E-mail: cesf@air-ca.org
Web: http://www.air-dc.org/csef_hom/

The mission of CSEF is to address fiscal policy questions and information needs related to the delivery and support of special education services throughout the United States, and to provide opportunities for information sharing on these topics.

Centre for Educational Leadership at McGill University (CEL)

3724 McTavish Street
Montreal, Quebec
Canada H3A 1Y1
Tel: (514) 398-7044 / FAX: (514) 398-8260
E-mail: Leadership@cel.lan.mcgill.ca
Web: http://www.cel.mcgill.ca/default.html/

The Center for Educational Leadership provides information on educational resources, school improvement projects, inclusive schools, and cooperative learning. CEL is a University based unit which promotes the continuing professional development of teachers, policy makers and educational leaders by providing them with state of the art programs of learning, service and research.

Centre for Studies on Inclusive Education (CSIE)

1 Redland Close Elm Lane
Redland, Bristol BS6 6UE
United Kingdom
Telephone +44 117 923 8450 / Fax +44 117 923 8460
Web: http://ep.open.ac.uk/wgma/CSIE/csiehome.html

CSIE provides international perspectives on inclusion, including information on relevant activities of UNESCO and the United Nations. CSIE is a British independent educational charity. It gives information and advice about inclusive education and related issues. The Centre, is committed to working towards an end to segregated education.

Center for Community Inclusion (CCI)

Lucille Zeph , Director
University of Maine
5717 Corbett Hall
Orono, ME 04469-5717
E-mail: lu_zeph@voyager.umeres.maine.edu
Web: http://www.ume.maine.edu/~cci/miss.html

The CCI, Maine's University Affiliated Program, is a partnership of people bringing together the resources of the community and the University to improve the quality of life for people with disabilities and their families. The Center conducts interdisciplinary educational activities, applied research and research and policy analysis, technical assistance and dissemination of information.

Consortium on Inclusive Schooling Practices (CISP)

Christine Salisbury, Director
Allegheny University of the Health Sciences, Child and Family Studies Program
One Allegheny Center, Suite 510
Pittsburgh, PA 15212
Tel: (412) 359-1600 / Fax: (412) 359-1601
E-mail: mcnutt@pgh.auhs.edu
Web: http://www.asri.edu/cfsp/brochure/abtcons.htm

CISP represents a collaborative effort to build the capacity of state and local education agencies to serve children and youth with and without disabilities in school and community settings. The focus of the project is on systemic reform rather than changes in special education systems only.

Consumer Information Center

Pueblo, CO 81009
Tel: (719) 948-3334 / Fax: (719) 948-9724
Web: http://www.pueblo.gsa.gov

The Consumer Information Center is a one-stop shopping center for federal consumer publications. CIC helps federal agencies and departments develop and distribute useful information to the public. Responding to CIC promotions, Americans write to Pueblo for millions of publications every year, requesting copies by mail, telephone, fax, and over the Internet.

Division for Learning Disabilities (DLD)

The Council for Exceptional Children
1920 Association Dr.
Reston, VA 22091
Tel:(703) 620-3660 / Fax: (703) 264-9494
Web: http://www.pfcec.org/pf7101.htm

DLD is a subdivision of PFCEC Pennsylvania Federation Council for Exceptional Children. DLD's mission is to promote the education of all exceptional children and youth; to serve as a resource for teachers of the learning disabled; to promote the education of children and youth with learning disabilities; and to support the goals of the Council for Exceptional Children and its members.

ERIC Clearinghouse on Disabilities and Gifted Education

Bernadette Knoblaugh, Director
ERIC/OSEP Special Project
Council for Exceptional Children
1920 Association Drive
Reston, VA 20191-1589
Tel: (800) 328-0272 / (703) 264-9449
Fax: (703) 620-2521
E-mail: ericec@cec.sped.org
Web: http://www.cec.sped.org/ericec.htm

AskERIC

Web: http://ericir.syr.edu/ERIC/eric.html

Ask Eric is an Internet resource that allows you to search the ERIC Clearinghouse. A guide to using AskERIC is included in this packet. For a discussion of the ERIC Clearinghouses, see the references section of this introductory packet.

Exceptional Children's Assistance Center

P.O. Box 16
Davidson, NC 28036
Tel: (800) 962-6817
Web: http://www.ed.gov/Family/ParentCtrs/except.html

The Exceptional Children's Assistance Center has developed the Parents in Partnership Project (PIPP), which aims to increase the involvement of North Carolina's families in all levels of their children's education. The Exceptional Children's Assistance Center provides training and information to parents of infants, toddlers, and youth with disabilities in North Carolina.

Higher Education and the Handicapped (HEATH)

1 Dupont Circle, Suite 800
Washington, DC 20036-1193
Tel:(800)544-3284 / (202)939-9320
Fax:(202) 833-4760
E-mail: heath@ace.nche.edu
Web: http://www.und.nodak.edu/dept/dss/heath.htm

HEATH is one of three clearinghouses authorized by the Individuals with Disabilities Education Act to provide specialized educational information to people with disabilities, their families, and professionals who work with them. The Center serves as an information exchange about educational support services, policies, procedures, adaptations, and opportunities on American campuses, vocational-technical schools, adult education programs, independent living centers, transition, and other training entities after high school.

Inclusion Press International

24 Thome Crescent
Toronto, ON., Canada M6H 2S5
tel: (416) 658-5363 fax: (416) 658-5067
E-mail: includer@idirect.com
Web: http://www.Inclusion.com/

Inclusion Press International is a small independent press that produces books and resources about full inclusion in school, work, and community. Their website includes listings of books, videos, conferences, excerpts from their newsletter, and other useful links and resources. They provide resources for courses and conferences.

Learning Disabilities of America (LDA)

4156 Library Road
Pittsburgh, PA 15234-1349
Tel:(412) 341-1515 / (412) 341-8077
Fax:(412) 344-0224
Web: http://www.ldanatl.org

LDA (formerly ACLD, the Association for Children and Adults with Learning Disabilities) is a national, non-profit, volunteer organization including individuals with learning disabilities, their families and professionals. LDA is dedicated to enhancing the quality of life for all individuals with learning disabilities and their families, to alleviating the restricting effects of learning disabilities, and to supporting endeavors to determine the causes of learning disabilities.

National Association for Down Syndrome

P.O. Box 4524
Oak Brooks, IL 60522-4542
Tel:(708) 325-9112
Web: http://www.nads.org

NADS serves children and adults with Down syndrome, siblings & families, and medical & educational professionals. Their services include parent support services, audio/visual presentations, seminars, conferences and research reports. They also produce several products that are available for purchase.

National Association of State Directors of Special Education

Eileen Ahearn, Director
1800 Diagonal Road, Suite 320
Alexandria, VA 22314
Tel: (703) 519-3800 / (703) 519-7008
Fax: (703) 519-3808
Web: http://www.edweek.org/context/orgs/nasdse.htm

The NASDSE is a non-profit professional organization of state education agency personnel who are responsibile for the education of young children with disabilities in each state, the District of Columbia, and the extra-state jurisdictions. NASDE's mission is to assist state agencies to maximize educational outcomes for individuals with disabilities. The association serves its members through publications, special projects, and technical assistance.

National Clearinghouse on Children who are Deaf-Blind (DB-Link)

John Reiman, Director
Western Oregon State College, Teaching Research Division
345 N Monmouth Avenue
Monmouth, OR 97361
Tel: (800) 438-9376 voice / (800) 854-7013 TTY
Fax: (503) 838-8150
E-mail: dblink@tr.wou.osshe.edu
Web: http://www.tr.wosc.osshe.edu/dblink/index.htm

DB-LINK is a federally funded information and referral service that identifies, coordinates, and disseminates (at no cost) information related to children and youth who are deaf-blind (ages 0 to 21 years).

National Clearinghouse for Professionals in Special Education (NCPSE)

Sara Conlon, Director
Council for Exceptional Children
1920 Association Drive
Reston, VA 220191-1589
800-641-7824 (Toll Free) / 703-264-9476 (Voice)
703-264-9480 (TTY) / 703-264-1637(Fax)
E-mail: ncpse@cec.sped.org
Web: http://www.cec.sped.org/ncpse.htm

The National Clearinghouse for Professions in Special Education (NCPSE) is operated by the Council for Exceptional Children (CEC). The Clearinghouse distributes information on recruitment, preservice preparation, employment opportunities, and attrition and retention issues for professionals and potential students in the fields of special education and the related services professions.

National Early Childhood Technical Assistance System (NECTAS)

Pascal Trohanis, Director
Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill
500 Nations Bank Plaza
137 E Franklin Street
Chapel Hill, NC 27514-3628
Tel: (919) 962-2001 voice / (919) 962-8300 TDD
Fax: (919) 966-7463
E-mail: nectasta.nectas@mhs.unc.edu
Web: http://www.nectas.unc.edu/

NETAS is a national technical assistance effort that supports programs for young children with disabilities and their families under the Individuals with Disabilities Education Act (IDEA).These programs include the Early Intervention Program for Infants and Toddlers With Disabilities (birth to 3 years of age), and the Preschool Grants Program (serving children 3 to 6 years of age).

National Information Center for Children and Youth with Disabilities (NICHCY)

P.O. Box 1492
Washington, D.C. 20013-1492
Tel:(800) 695-0285 / (202) 884-8200
FAX (202) 884-8441
E-mail: nichcy@capcon.net.internet
Web: http://nichcy.org

NICHCY is the national information and referral center that provides information on disabilities and disability-related issues for families, educators, and other professionals. Their special focus is children and youth (birth to age 22). NICHCY's Services Include: Personal Responses to Your Specific Questions; NICHCY Publications; Referrals; and Information Searches of Our Databases and Library. Materials are also available in Spanish, on disk, and as camera-ready originals.

National Information Center on Deafness (NICD)

Galludet University
800 Florida Ave. NE
Washington, DC 20002-3695
Tel:(202) 651-5051 / (202) 651-5052 TTY
Fax:(202) 651-5054
E-mail: nicd@gallux.gallaudet.edu
Web: http://www.gallaudet.edu/~nicd/aboutnicd.html

The National Information Center on Deafness has served as a centralized source of information on topics dealing with deafness and hearing loss. NICD distributes information on deafness, hearing loss, and services and programs related to people with hearing loss available throughout the United States.

National Institute on Life Planning for Person with Disabilities (NILP)

Administrative Office
P.O. Box 5093
Twin Falls, ID, 83303-5093
Phone: (707) 664-4235 / Fax: (707) 762-2369
E-Mail: rfee@sonic.net
Web: http://www.sonic.net/nilp/

The National Institute on Life Planning for Persons with Disabilities(NILP) serves as a national clearinghouse for professional members on all aspects of Life Planning including Life Planning, Persons Centered Planning/Circles of Support, Government and Community Benefits, Advocacy and Guardianship (Conservatorship, Tutorship), Legal Issues - Special Needs Trusts, Wills, Transition Planning in Schools, Aging Issues, Financial Planning, Housing, Supported Employment, and other issues.

National Resource Center (NRC)

National Resource Center on Community Integration
The Center on Human Policy
Syracuse University
805 South Crouse Avenue
Syracuse, NY 13244-2280
Tel: 1-800-894-0626 / (315) 443-3851
FAX (315) 443-4338 / TTY (315) 443-4355
E-mail: thechp@sued.syr.edu
Web: http://web.syr.edu/~thechp/nrc.htm

The National Resource Center on Community Integration is designed to promote the full inclusion of people with developmental disabilities in community life. The NRC works in the area of training, technical assistance, consultation and information dissemination. They also produce a range of informational materials on community integration and can respond to individual questions and requests for assistance.

National Transition Alliance for Youth with Disabilities (NTA)

Frank Rusch, Director
Transition Research Institute at Illinois
University of Illinois
113 Children's Research Center
51 Gerty Drive
Champaign, IL. 61820
Tel: (217) 333-2325 / Fax: (217) 244-0851
E-mail: leachlyn@ux1.cso.uiuc.edu
Web: http://www.dssc.org/nta/html/index_2.htm

The mission of the National Transition Alliance is to ensure that youth with disabilities, including those with severe disabilities, acquire skills and knowledge, gain experience, and receive services and supports necessary to achieve successful postschool results, including postsecondary education, gainful employment, independent living, community living, social integration, and lifelong learning.

National Transition Network (NTN)

David Johnson, Director
Institute on Community Integration
University of Minnesota
430 Wulling Hall
86 Pleasant Street SE
Minneapolis, MN 55455
Tel: (612) 626-8200 / Fax: (612) 626-7956
E-mail: alesh001@umn.edu
Web: http://www.ici.coled.umn.edu/ntn

NTN provides technical assistance and evaluation services to states with grants for Transition Systems Change and School-To-Work Inplementation and Development. The general mission of NTN is to strengthen the capacity of individual states to effectively improve transition and school-to-work policies, programs, and practices as they relate to youth with disabilities. In addition to direct technical assistance to states with projects, NTN develops and disseminates a variety of policy publications and other networking activities.

NCSA Mosaic

Joseph Hardin, Project Coordinator
Associate Director, Software Development Group
National Center for Supercomputing Applications
University of Illinois, Urbana-Champaign
(217) 244-7802; fax (217) 333-5973
E-mail: hardin@ncsa.uiuc.edu
http://bucky.aa.uic.edu/index.html

Titled the NCSA Mosaic Access Page, this webpage is designed for people with disabilities who want to use the Internet. It covers a variety of subjects, including Access to Computers, Access Methods by Disability, Resources, and Mosaic Access.

Parents Engaged in Education Reform (PEER) Project: Goals 2000 and Children with Disabilities

Carolyn Romano, Charlotte "Dee" Spinkston, Co-Directors
Federation for Children with Special Needs
95 Berkeley
Boston, MA 02116
Tel: (617) 482-2915 / Fax: (617) 695-2939
E-mail: ggarbbard@fcsn.org
Web: http://www.fcsn.org/peer/

Parents Engaged in Education Reform (PEER) is a national technical assistance project funded by the U.S. Department of Education, Office of Special Education Programs. PEER's purpose is to increase the participation of parents of children with disabilities and their organizations in school reform efforts. The PEER Project provides opportunities for parents, parent organizations, and professionals to learn from each other about school restructuring efforts occurring in states and local communities.

Public Citizen

1600 20th St. NW
Washington, DC 20036
Tel:(202)588-1000
Web: http://www.citizen.org/

Public Citizen fights for safer drugs and medical devices, cleaner and safer energy sources, a cleaner environment, fair trade, and a more open and democratic government. It is made up of six divisions: Congress Watch, Health Research Group, Litigation Group, Critical Mass Energy Project, Global Trade Watch, and Buyers Up.

Utah's Project for Inclusion (UPI)

Utah State Office of Education
SARS
250 East 500 South
Salt Lake City, Utah 84111
Web: http://www.usoe.k12.ut.us/sars/inclusion/inclusion.html

Utah's Project for Inclusion is a federally funded systems change project through the Utah State Office of Education. Their mission is to promote effective inclusive education for all students throughout the State of Utah. Their website includes activities, technical assistance & support services; local and national conferences and workshops, and links to additional agencies & projects promoting inclusive education.

The Western Regional Resource Center (WRRC)

Western Regional Resource Center
University of Oregon, College of Education
1268 University of Oregon
Eugene, Oregon 97403
Tel: (541) 346-5641 / TDD: (541) 346-0367
FAX: (541) 346-5639
E-MAIL: wrrc@oregon.uoregon.edu
Web: http://interact.uoregon.edu/wrrc/inclusionhome.html

The Western Regional Resource Center's mission is to provide technical assistance to State Education Agencies to assist and support them in systemic improvement policies, procedures and practices which will result in quality programs and services for children with disabilities and their families. They offer consultation, technical assistance, training, product development and information services which provide the states access to current special education policy, technology and best practices research. The WRRC web site has an extensive searchable bibliography about inclusion.

A Special Resource.

Circle of Inclusion

Outreach Training Project

The Circle of Inclusion Outreach Training Project is designed to address the challenges and issues of inclusive program development for children with severe, multiple disabilities. The project goals of training, technical assistance, evaluation, dissemination, and management place a special emphasis on the development of collaborative programs between community early childhood programs, local education agencies, and special education services.

WEBSITE:
HTTP://WWW.CIRCLEOFINCLUSION.ORG/

CONTACT:

Deann Lovell, Project Coordinator
University of Kansas
Department of Special Education
3001 Dole Building
Lawrence, KS 66045
Tel: (913) 864-0685
deann@falcon.cc.ukans.edu

Barbara Thompson, Project Co-Director
bthompson@quest.sped.ukans.edu

Marilyn Ault, Project Co-Director
mault@quest.sped.ukans.edu

Dave Lindeman, Project Co-Director
dplindeman@ parsons.lsi.ukans.edu

The RRFC Network

The Regional Resource and Federal Centers (RRFC) Network offers tools and strategies for achieving effective education and human services delivery systems. Serving all states and outlying jurisdictions, RRFC assistance includes: coordinating information, services and programs; coordinating interstate exchanges; and linking research with practice. Technical assistance is strengthened by original publications and products.

REGIONAL RESOURCE AND FEDERAL CENTERS

The Federal Resource Center for Special Education (FRC)
Carol Valdivieso, Director
Academy for Educational Development
1875 Connecticut Ave. NW Suite 900
Washington, DC. 20009
Tel: (202) 884-8215 / (202) 884-8200
Fax: (202) 884-8443
WebPage: www.dssc.org/frc/
GTE-INS: DCAFED

Northeast Regional Resource Center (NERRC)
Pamela Kaufmann, Director
Trinity College of Vermont,
McAuley Hall 208 Colchester Ave.
Burlington, VT 05401-1496
Tel: (802) 658-5036 / (802) 860-1428
Fax: (802) 658-7435
Email: NEERC@aol.com
WebPage: http://interact.uoregon.edu/wrrc/nerrc/index.htm
GTE-INS: NERRC

Mid-South regional Resource Center (MSRRC)
Ken Olsen, Director
Human Development Institute
University of Kentucky
126 Mineral Industries Building
Lexington, KY 40506-0051
Tel: (606) 257-4921
Fax: (606) 257-4353
Email: MSSRC@ihdi.ihdi.uky.edu
WebPage:http://ihdi.ihdi.uky.edu/projects/msrrc/index.html
GTE-INS: MSSRC

BEST COPY AVAILABLE

South Atlantic Regional Resource Center (SARRC)
Denise Stewart, Acting Director
Florida Atlantic University
1238 North Univeristy Drive
Plantation, FL. 33322
Tel: (954) 473-6106
Fax: (954) 424-4309
Email: SARRC@ acc.fau.edu
WebPage: www.fau.edu/admin/a-n-f/sarrc.htm

Great Lakes Area Regional Resource Center (GLARRC)
Larry Magliocca, Director
Center for Special Needs Populations
The Ohio State University
700 Ackerman Road Suite 440
Columbus, OH 43202
Tel: (614) 447-0844
Fax: (614) 447-9043
Email: Magliocca.1@osu.edu
WebPage: www. csnp.ohio-state.edu/glarrc.htm
GTE-INS: GLARRC

Mountain Plains Regional Resource Center (MPRRC)
John Copenhaver, Director
Utah State University
1780 North Research Parkway Ste. 112
Logon, UT. 84341
Tel: (801) 752-0238 / (801) 753-9750
Fax: (801) 753-9750
Email: latham@cc.usu.edu
WebPage: www.usu.edu/~mprrc/

Western Regional Resource Center (WRRC)
Richard Zeller, Director
1268 Univeristy of Oregon
Eugene, OR. 97403-1268
Tel: (541) 346-5641 / (541) 346-0367
Fax: (541) 3346-5639
Email: wrrc@oregon.uoregon.edu
WebPage: http://interact.uoregon.edu/wrrc/wrrc.html
GTE-INS: WRRC

C. Consultation Cadre

Least Intervention Needed: Toward Appropriate Inclusion of Students with Special Needs

Professionals across the country volunteer to network with others to share what they know. Some cadre members run programs, many work directly with youngsters in a variety of settings and focus on a wide range of psychosocial problems. Others are ready to share their expertise on policy, funding, and major system concems. The group encompasses professionals working in schools, agencies, community organizations, resource centers, clinics and health centers, teaching hospitals, universities, and so forth.

People ask how we screen cadre members. We don't! It's not our role to endorse anyone. We think it's wonderful that so many professionals want to help their colleagues, and our role is to facilitate the networking. If you are willing to offer informal consultation at no charge to colleagues trying to improve systems, programs, and services for addressing bamers to learning, let us know. Our list is growing each day; the following are those currently on file related to this topic. Note: the list is alphabetized by Region and State as an aid in finding a nearby resource.

Central States

Iowa

Phillip Mann, Director
Seashore Psychology Clinic
Department of Psychology, E11SH
University of Iowa
Iowa City, IA 52242
Phone: 319/335-2468 Fax: 319/335-0191
Email: philip-mann@uiowa.edu

Ohio

Joseph E. Zins, Professor
University of Cincinnati
339 Teachers College
Cincinnati, OH 45221-0002
Phone: 513/556-3341 Fax: 513/556-1581
Email: joseph.zins@uc.edu

East

Delaware

Kathy Spencer, Social Worker
Dover High School Wellness Center -VNA
1 Patrick Lynn Drive
Dover, DE 19901
Phone: 302/672-1586 Fax: 302/674-2065

Rhode Island

Robert Wooler, Executive Director
RI Youth Guidance Center, Inc.
82 Pond Street
Pawtucket, RI 02860
Phone: 401/725-0452 Fax: 401/725-0452

Pennsylvania

Ann O'Sullivan
Associate Professor of Primary Nursing Care
University of Pennsylvania School of Nursing
420 Guardian Drive
Philadelphia, PA 19104-6096
Phone: 215/898-4272 Fax: 215/573-7381
Email: osull@pobox.upenn.edu

Northwest

Oregon

Philip Bowser, School Psychologist
Roseburg School District
1419 Valley View Drive, NW
Roseburg, OR 97470
Phone: 503/440-4038 Fax: 503/440-4003
Email: pbowser@ednet1.osl.or.gov

Southeast

Arkansas

Barbara Baldwin, Social Worker
Arkansas Department of Health
Central High Wellness Clinic
1500 S. Park
Little Rock, AR 72205
Phone: 501/324-2330 Fax: 501/374-7920

Maureen Bradshaw
State Coordinator, for Behavioral Interventions
Arch Ford Education Service Cooperative
101 Bulldog Drive
Plummerville, AR 72117
Phone: 501/354-2269 Fax: 501/354-0167
Email: mbradshaw@conwaycorp.net

Florida

Howard Knoff, Professor/Director
School Psychology Program/
Institute for School Reform
University of South Florida
4202 East Fowler Avenue, FAO 100U
Tampa, FL 33620-7750
Phone: 813/974-9498 Fax: 813/974-5814
Email: knoff@tempest.coedu.usf.edu

Kentucky

William Pfohl, Professor of Psychology
Western Kentucky University
Psychology Department
1 Big Red Way
Bowling Green, KY 42101
Phone: 502/745-4419 Fax: 502/745-6474
Email: william.pfohl@wicu.edu

Louisiana

Dean Frost, Director
Bureau of Student Services
Louisiana State Department of Education
P.O. Box 94064
Baton Rouge, LA 70804
Phone: 504/342-3480 Fax: 504/342-6887

North Carolina

Bill Hussey, Section Chief
Dept. of Public Instruction
301 N. Wilmington St.
Raleigh, NC 27601-2825
Phone: 919/715-1576 Fax: 919/715-1569
Email: bhussy@dpi.state.nc.us

William Trant, Director Exceptional Programs
New Hanover County Schools
1802 South 15th Street
Wilmington, NC 28401
Phone: 910/254-4445 Fax: 910/254/4446
Email: wtrant@wilmington.net

Virginia

Richard Abidin, Director of Clinical Training
Curry Programs in Clinical and School Psychology
University of Virginia
405 Emmet Street, 147 Ruffner Hall
Charlottesville, VA 22903-2495
Phone: 804/982-2358 Fax: 804/924-1433
Email: rra@virginia.edu

Southwest

California

Marcia London Albert
Academic Skills Coordinator
College of Medicine, UCI
Medical Education Bldg. 802
P.O. Box 4089
Irvine, CA 92697-4089
Phone: 714/824-3415 Fax: 714/824-2083
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D. A Resource Aid Prepared by the Clearinghouse:

Parental Consent and Due Process

There was a time not so long ago when assigning students to special programs was done matter-of-factly. Most professionals believed they knew who needed help and what help was needed. It was a relatively simple matter to inform those involved that a problem existed and what was to be done. Growing awareness of rights and of the potentially harmful effects of treatment led to safeguards. Currently, consent is not taken for granted.

Parent and student involvement have become prominent considerations in designing screening, diagnosis, and placement practices in the schools. Parent organizations and child advocates have insisted that parents be involved in any decision that might have a profound effect on the course of a child's life. With respect to special education, this fact is reflected in the "procedural safeguards" associated with the passage of Public Law 94-142. These safeguards are rooted in the legal concept of due process as established in the Fourteenth Amendment to the federal constitution.

Due process protects people's rights; procedural safeguards are meant to help guarantee that everyone is treated fairly. The special education procedural safeguards are meant to ensure that parents are involved in decisions regarding testing and placement of their child. That is, such interventions are not supposed to take place without parental consent.

Some of the safeguards spelled out in law are the following:

1. Parents must be notified whenever the school plans to conduct a special evaluation of their child.
2. Parents have the right to refuse consent for such an evaluation. (However, the school district has the right to a legal hearing to prove it is needed. Should parents want a special evaluation and the school refuses to provide it, parents can seek a legal hearing.)
3. Parents have the right to:
   - review the procedures and instruments to be used in any evaluation.
   - be informed of the results and review all records
   - obtain an independent educational evaluation to be considered in any decisions
4. Parents must be notified whenever the school wants to change their child's educational placement, and they have the right to refuse consent for such a change. (Again, the school district can ask for a legal hearing to overrule the parent's decision; and parents who are unable to convince the school to provide the special placement they want can also seek such a hearing.)

All notifications and explanations are to be given in the parent's primary language or other primary mode of communication.

SOME MODEL PROGRAMS FOR SERVING ALL CHILDREN WELL

Collaborative Teaching Model (CTM): Virginia and Kansas

The CTM was developed by local personnel in Virginia and Kansas to improve services for students with learning disabilities. This model was defined as "a proactive approach with general and special educators maintaining joint responsibility for instruction in heterogeneous, integrated settings." Only children whose IEP goals could be met in a full inclusion program participate. Students with Learning Disabilities in the CTM program are all assigned to the general education class appropriate to their grade level, in which the special education and general education teachers co-teach. In Virginia, special education teachers spent 90 minutes a day in each general education class, and participated in the co-planning and materials modification for these classes.

References:

Inclusion in Virginia: Educational Experiences of Students with Learning Disabilities in One Elementary School. J. M. Baker (1995). *The Journal of Special Education, 29*, 116-123.

Inclusion in Kansas: Educational Experiences of Students with Learning Disabilities in One Elementary School. N. Zigmond (1995). *The Journal of Special Education, 29*, 144-154.

Instructional Support Team Project

The Instructional Support Team Project, an initiative of the Pennsylvania Department of Education, is a state-wide effort to transform the structure and goals of special education services. There are two major aspects of this transformation: 1) the focus of special education shifts away from categorizing services to utilizing services in a manner that supports effective regular education services before students are referred for evaluation, and 2) the focus of interventions is on the instructional needs of students rather than on the internal deficiencies of students. The core mechanism for implementing these changes is the Instructional Support Team (IST) which serves as a bridge between special and regular education programs. At each school IST's function as pre-referral intervention groups that link all school resources and provide peer-support and problem solving assistance for teachers; provide initial screening; assist teachers in developing accommodations to help students with disabilities; and help the regular education teacher to make better use of support services.

Reference:

Bridging Special and Regular Education: The Pennsylvania Initiative.
J.F. Kovaleski, J.A. Tucker, & L.J. Stevens (1996). *Educational Leadership, 55*(3), *44-47.*

Mainstreaming Experience for Learning Disabled (MELD): Inclusion in Pennsylvania

MELD is a full-time mainstreaming model developed by the University of Pittsburgh. The MELD model involves all school personnel in the education of all students with LD. Pull-out programs are eliminated and LD students are reassigned to full-time general education classes and participate in all class activities. These students are distributed across many classes to reduce load. Special education teachers co-teach all classes and participate in co-planning, even for those classes that do not have LD students. All students have the opportunity to work with modified materials originally designed to help those with LD.

Relevant Reference:

Inclusion in Pennsylvania: Educational Experiences of Students with Learning Disabilities in One Elementary School. N. Zigmond (1995). *The Journal of Special Education*, 29, 124-132.

Project Achieve:
An Integrated Student-Centered Service Delivery Model for Public School Systems

Project Achieve is a school reform program that targets academically and socially at-risk students. Project Achieve places emphasis on improving academic and social behavior of students in order to, among other things, maintain integration and reduce placement into special education. This is done through an integrated process that involves systemic changes in the domains of organization, resource development, in service training, and parent-community involvement.

For more on this model, see: Project Achieve: A collaborative, school-based school reform process to improve the academic and social progress of at-risk and underachieving students. H. M. Knoff & G. M. Batsche (1995). Information Packet. School Psychology Program: Institute for School Reform, Integrated Services, and Child Mental Health and Education Policy: University of South Florida, 4202 East Fowles Ave. Tampa, FL 33620-7750

School Building Model for Inclusion: University of Washington

Originally developed by researchers at University of Washington, the School-building model requires intensive restructuring of the curriculum. All students with LD's are placed in general education classes. Pull-out services are made available to all students, not only those with LD's. In addition, special instruction and tutoring is provided before and after school and during lunch breaks, and peer tutoring is also made available outside and during class.

Relevant Reference:

Inclusion in Washington: Educational experiences of students with learning disabilities in one elementary school. J. M. Baker (1995). *The Journal of Special Education, 29*, 155-162.

ADAPTIVE LEARNING ENVIRONMENT MODEL (ALEM)

ALEM was designed to make school a place where each child can effectively master skills in academic subjects and to foster self-responsibility for learning, coping, and, managing behavior in the classroom. This multifaceted approach includes a perspective learning component consisting of hierarchically organized basic skill curricula that students pursue at their own pace; an open-ended exploratory learning component; classroom management procedures emphasizing teacher feedback, reinforcement, and positive interactions with students; a flexible organizational structure that allows for multi-age grouping and team teaching.

References:

The Adaptive Learning Environment Model: Design, implementation, and effects by M. Wang, P. Gennari, & H.C. Waxman (1985). In M. Wang & H. Wahlberg (Eds.), *Adapting instruction to individual differences*. Berkeley, CA: McCutchan.

A Special Resource

Project Ride

Responding to Individual Difference in Education

This program is designed to link behavioral and academic interventions with teachers of at-risk and difficult-to-teach students in regular classrooms. RIDE involves a series of steps, beginning with a well-articulated description of the behavior, followed by three options: Effective Classroom Practices, Computer Tactics Bank and Video Library, and School-Wide Assistance Teams or SWAT.

Contact: Ray Beck, Project Director
P.O. Box 1809 , Longemont, CO 80502-1809
Tel: (303) 651-2829

Modules for Staff Development

The following pages describe training modules developed by the Kansas Project for the Utilization of Full Inclusion.

Kansas Project for the Utilization of Full Inclusion
Best Practices for Students with Severe Disabilities
ABSTRACT

Project Co-Director Charles R. Campbell, Ed. D.
Project Co-Director Patti C. Campbell, Ed. D.

Using Best Practices to Promote Fully Inclusive Education
for Students with Diverse Learning Abilities

This three year project resulted in a comprehensive instructional package for training teachers to apply innovative practices that expand opportunities for service delivery of students with diverse learning abilities in inclusive neighborhood schools. Target users include inservice professionals in regular and special education, parents, and related service personnel engaged in or planning for the full inclusion in neighborhood school of students with diverse learning abilities. In addition, the package has been used extensively in preservice training programs. Specifically, the outcome of the project was a validated inservice instructional approach and supporting multimedia materials that provide the knowledge and skills to support students with diverse learning capabilities in inclusive schools. The training emphasizes full inclusion process elements that include 1) support for student placement in inclusive neighborhood schools; 2) dual ownership (regular and special education) of students regardless of academic and adaptive functioning; 3) increased opportunities for integration and social interactions with nondisabled peers, 4) collaboration and cooperation among parents, regular, special, and related service personnel, 5) infusion of regular and special education instructional methodologies; and 6) increased independent functioning and greater acceptance and appreciation of the individual within the community.

The individual school is seen as the unit of change, therefore, training is provided to a student centered team that minimally includes the principal, one regular educator, one special educator, other professionals that support the student, and a member of the student's family. Training is provided using the six modules outlined below. Each training session typically requires one working day. However, modules are designed to be flexible in the delivery format, and the content can be easily broken into shorter training periods as needs dictate.

The series contains six Trainee Workbooks, each with an accompanying Trainer Guidelines manual, and four supporting video tapes. Trainer Guidelines provide step by step training procedures and overhead transparencies complete with narrative suggestions. The Trainee Workbook includes a copy of all overhead transparencies, activities, and reference list. The four videos complement and enhance the print materials. A brief description of the training modules follows.

Module 1. ***Collaborative teaming: Skills for communication with small planning groups.***

This module provides training in skills necessary for teams to solve problems and issues associated with the inclusion of a student with diverse leaning abilities into the general education environment. Skills necessary for building interdependence of teams, group functioning, and individual and group communication are included. Content includes a format for identifying and solving problems, and conflict resolution.

Module 2. ***Curriculum matrixing: Skills for instructional inclusion.***

This module develops skills necessary to integrate the IEP goals and objectives of a student with diverse learning abilities into the General education framework at both the building and classroom level. Content includes instruction in using TEAMS, an environment inventory, and a matrixing approach to ensuring instructional inclusion of students with diverse learning abilities.

Module 3. ***Instructional teaming (A): Skills for Planning instruction.***

This module focuses on skills necessary to plan appropriate instruction for a student with diverse learning needs within the general education environment. Content includes guidelines for determining instructional outcomes, designing authentic assessments, and evaluating instructional performance.

Module 4 ***Instructional teaming (B): Skills for delivering instruction.***

This module focuses on skills necessary to implement and evaluate instruction for a student with diverse learning needs within the general education environment. Content includes guidelines for planning behavior change, a format for taking instructional data, and rules for making instructional decisions.

Module 5 ***Peer Involvement: Skills for involving nondisabled peers in the inclusive school.***

This module provides information on skills necessary for planning and implementing involvement of nondisabled peer in the education of students with diverse learning abilities. Content includes guidelines for planning peer involvement, a format for training peer tutors, and including students with diverse learning needs in cooperative learning groups.

Module 6. ***Service improvement planning Skills for determining inservice training needs.***

This module focuses on skills necessary for building a fully inclusive school. Content includes a format for developing a school profile, collecting school needs assessment data, and a format for developing an school action plan.

The package, *Building Inclusive Schools: An Instruction/ Series, Innovative practices that support students with diverse /earning abilities in neighborhood schools* will be available from the authors.

This document was downloaded from
http://www.valdosta.peachnet.edu/coe/coed/sped/camp/proj/abstract.html

An Example of an ERIC Digest

INCLUDING STUDENTS WITH DISABILITIES IN GENERAL EDUCATION CLASSROOMS

The Individuals with Disabilities Education Act (IDEA) requires that a continuum of placement options be available to meet the needs of students with disabilities. The law also requires that: "to the maximum extent appropriate, children with disabilities ... are educated with children who are not disabled, and that special classes, separate schooling, or other removal of children with disabilities from the regular environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be attained satisfactorily." IDEA Sec. 612 (5) (B).

One of the educational options that is receiving increasing attention is meeting the needs of students with disabilities in the regular classroom. This digest is written for the practitioner who is working in the regular class environment with students who have disabilities. Years of research have contributed to our knowledge of how to successfully include students with disabilities in general education classes. Listed below are the activities and support systems commonly found where successful inclusion has occurred.

ATTITUDES AND BELIEFS

* The regular teacher believes that the student can succeed.
* School personnel are committed to accepting responsibility for the learning outcomes of students with disabilities.
* School personnel and the students in the class have been prepared to receive a student with disabilities.
* Parents are informed and support program goals.
* Special education staff are committed to collaborative practice in general education classrooms.

SERVICES AND PHYSICAL ACCOMMODATIONS

* Services needed by the student are available (e.g., health, physical, occupational, or speech therapy).
* Accommodations to the physical plant and equipment are adequate to meet the student's needs (e.g., toys, building and playground facilities, learning materials, assistive devices).

SCHOOL SUPPORT

* The principal understands the needs of students with disabilities.
* Adequate numbers of personnel, including aides and support personnel, are available.
* Adequate staff development and technical assistance, based on the needs of the school personnel, are being provided (e.g., information on disabilities, instructional methods, awareness and acceptance activities for students, and team building skills).
* Appropriate policies and procedures for monitoring individual student progress, including grading and testing, are in place.

COLLABORATION

* Special educators are part of the instructional or planning team.
* Teaming approaches are used for problem-solving and program implementation.
* Regular teachers, special education teachers, and other specialists collaborate (e.g., co-teaching, team teaching, teacher assistance teams).

INSTRUCTIONAL METHODS

* Teachers have the knowledge and skills needed to select and adapt curricula and instructional methods according to individual student needs.
* A variety of instructional arrangements are available (e.g., team teaching, cross-grade grouping, peer tutoring, teacher assistance teams).
* Teachers foster a cooperative learning environment and promote socialization.

MAKING IT WORK: A SAMPLE SCENARIO

Classrooms that successfully include students with disabilities are designed to welcome diversity and to address the individual needs of all students, whether they have disabilities or not. The composite scenario below is based on reports from several teachers. It provides a brief description of how regular and special education teachers work together to address the individual needs of all of their students.

Jane Smith teaches third grade at Lincoln Elementary School. Three days a week, she co-teaches the class with Lynn Vogel, a special education teacher. Their 25 students include 4 who have special needs due to disabilities and 2 others who currently need special help in specific curriculum areas. Each of the students with a disability has an IEP that was developed by a team that included both teachers. The teachers, paraprofessionals, and the school principal believe that these students have a great deal to contribute to the class and that they will achieve their best in the environment of a general education classroom.

All of the school personnel have attended inservice training designed to develop collaborative skills for teaming and problem-solving. Mrs. Smith and the two paraprofessionals

who work in the classroom also received special training on disabilities and on how to create an inclusive classroom environment. The school principal, Ben Parks, had worked in special education many years ago and has received training on the impact of new special education developments and instructional arrangements on school administration. Each year, Mr. Parks works with the building staff to identify areas in which new training is needed. For specific questions that may arise, technical assistance is available through a regional special education cooperative.

Mrs. Smith and Miss Vogel share responsibility for teaching and for supervising their two paraprofessionals. In addition to the time they spend together in the classroom, they spend 1 to 4 hours per week planning instruction, plus additional planning time with other teachers and support personnel who work with their students.

The teachers use their joint planning time to problem-solve and discuss the use of special instructional techniques for all students who need special assistance. Monitoring and adapting instruction for individual students is an ongoing activity. The teachers use curriculum-based measurement to systematically assess their students' learning progress. They adapt curricula so that lessons begin at the edge of the student's knowledge, adding new material at the student's pace, and presenting it in a style consistent with the student's learning style. For some students, preorganizers or chapter previews are used to bring out the most important points of the material to be learned; for other students, new vocabulary words may need to be highlighted or reduced reading levels may be required. Some students may use special activity worksheets, while others may learn best by using media or computer-assisted instruction.

In the classroom, the teachers group students differently for different activities. Sometimes, the teachers and para-professionals divide the class, each teaching a small group or tutoring individuals. They use cooperative learning projects to help the students learn to work together and develop social relationships. Peer tutors provide extra help to students who need it. Students without disabilities are more than willing to help their friends who have disabilities, and vice versa.

While the regular classroom may not be the best learning environment for every child with a disability, it is highly desirable for all who can benefit. It provides contact with age peers and prepares all students for the diversity of the world beyond the classroom.

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Note. An ERIC minibibliography, "Including Students with Disabilities," is also available.

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Author: ERIC Clearinghouse on Disabilities and Gifted Education, Reston, VA.

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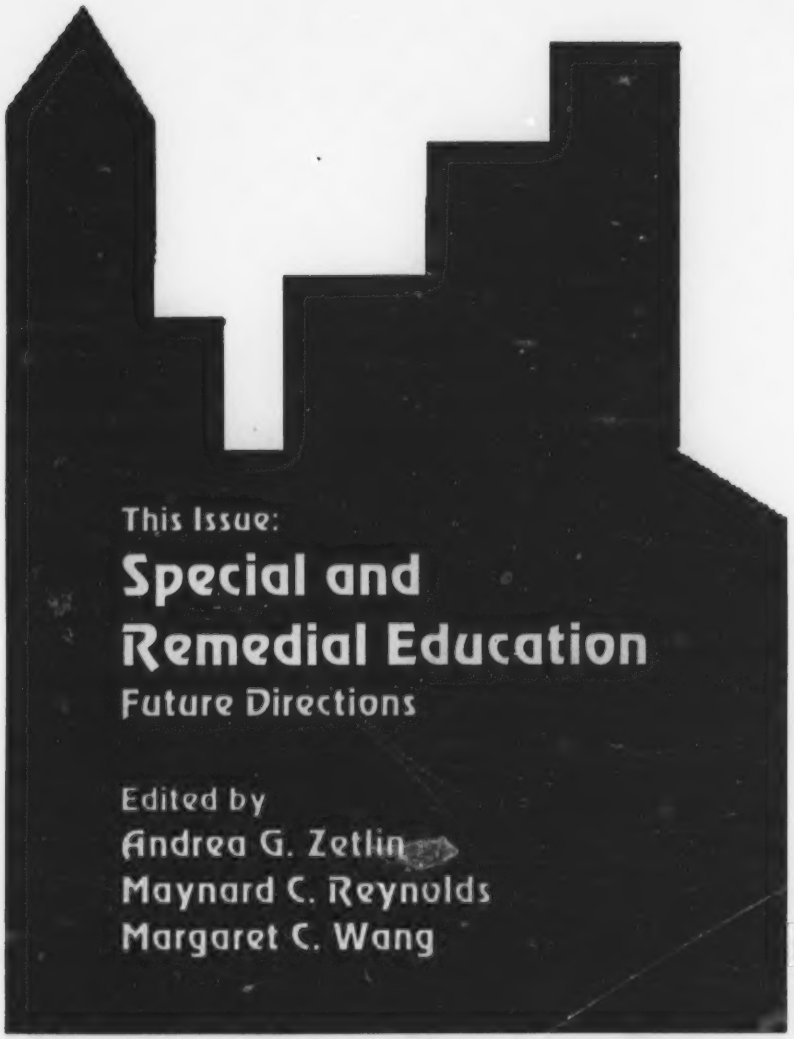

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Inclusion: Some Issues

School reform efforts of the 1990s must be directed to formation of a comprehensive and cohesive educational system that encompasses the full range of categorical and general education programs. Past history has shown that, when committed to addressing the needs of children, we have proposed creative solutions and sidestepped the numerous obstacles to good quality education and services for all.

Revnolds, Zetlin, & Wang (1995)

A special issue of *Education and Urban Society* provides a perspective on future directions for schools related to "least intervention needed" and "inclusion."

In the introduction, Maynard Reynolds, Andrea Zetlin, and Margaret Wang outline a variety of major issues.

August 1995

Volume 27 Number 4

CATEGORIES BEYOND THE EVIDENCE
An Introduction to the Issues

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A primary means of treating the wide and growing diversity among students in the schools has been to categorize them into subclasses and to set each of them aside in some fashion. The field of special education, for example, typically includes 8 to 10 different categories of students who are labeled by category, then separated full- or part-time into various special schools, special classes, or resource rooms. The Chapter I programs for low-achieving economically disadvantaged students have added about 5 million students per year to about that same number served in special education.

The federal government's strong entry into K-12 education in the mid-1960s and in the following years has been mainly through categorical programs; but across the nation, states and local districts have added dozens of other categories. The story of this piecemeal approach to education and the associated controversies is told in many places, but recently and quite thoroughly in a volume edited by Wong and Wang (1994).

Currently, there is a trend toward less segregation of children by categories in the schools and more accommodations for them in regular school programs (Commission on Chapter I, 1992; U.S. Department of Education, 1994), but millions of children in the nation are still identified, labeled, and served in the schools by categories and in separate places.

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CRITERIA FOR CATEGORIZING CHILDREN

What should be the criteria for the introduction of a category for the instructional classification of students (Reynolds, 1991)? Legislators have authority of course, to ask educators to monitor the school progress of students in whatever classes they choose and to press for better outcomes for them. For example, political leaders have made a case for students who are deaf, for those in families that are migratory or poor, and so forth. To give priority to such students is not too say that they necessarily belong in distinct instructional groups of that they should be separated for instruction.

An answer to the question concerning instructional categories has been provided by the special panel of experts assembled by the National Academy of Science; see their report entitled *Placing Children in Special Education: A Strategy for Equity* (Heller, Holtzman, & Messick, 1982). The panel suggests that two standards should be met whenever students are classified and placed in a categorical program:

1. *The classification should signal the prescription of distinctive instructional practices for members of the group.* In the case of children who are blind, for example, there is the distinctive braille method and materials for reading. It should be noted that it is not just the characteristics of individuals (although always important) that are relevant here; it is also a matter of a different type or quality of instruction to which all members of the class or group are assigned. Attention goes to the distinct treatment or type of instruction as well as to characteristics of individuals as the classification decision is made. In the schools it is decisions about instruction that are the key, which means that classifications for purposes of medical or other forms of treatment will often be quite different.

2. *There must be evidence that the special treatment is efficacious*; that is, that it has enhancing effects on the learning of members of the class. It is not enough to declare a child to have mental retardation, for example, and to place the child in a special class for students with exceptional educational needs. There must be evidence that the classification and the prescribed program have validity; that is, they generally show positive results. The treatment is chosen because the evidence predicts benefits for the identified

pupils. School psychologists and others who participate in the classification and placement decisions in this framework are called upon not just to consider characteristics of children but also the evidence of validity in programs.

Even when both of the above-stated standards are met, it still may not be appropriate to physically separate a child for the necessary instruction. The regular teacher alone or working in a teaming arrangement with others may be able to offer the appropriate instruction in the regular or mainstream environment. The *least restrictive environent* principle, as expressed in recent law and court decisions, is a call for efforts by educators to expand their capacities to offer appropriate instruction without segregation.

It should also be noted that even though a given child may not need a distinctive type of instruction, he or she may need especially intensive forms of ordinary education. A child who makes poor progress under first-tries in reading instruction, for example, may need one-on-one or small-group remedial help. Through highly intensive and individualized instruction, the teacher can often better maintain student attention on task, arrange the sequence of experiences in detail, offer frequent feedback to the child, and in all ways manage directly the instructional program. In the language of research, this case shows an ordinal interaction of aptitude (characterizing the student) and treatment, whereas in cases where different types of instruction are required, one has a disordinal aptitude-treatment-intervention (Cronbach & Snow, 1977).

ISSUES CONCERNING CATEGORIZATION

The major problem discussed in this and succeeding articles of this issue or the journal is that we have gone much too far in the categorizing and separation of students in school programs. The separation of pupils correlates also with separateness of preparation and licensing programs for teachers, of literature for the several categories of students, or bureaucratic management, of funding systems, and more, creating what some have termed a second and highly disjointed system of education (Wang, Reynolds & Walberg 1988).

Categorical programs are also very expensive. In 1991, special education absorbed about 25% of the New York City school systems budget (Berger, 1991); this example tells of only one set of categorical programs in that financially hard-pressed city. For the nation as a whole, about $18 billion were spent annually in the mid-1980s just in supplementary aids to special education programs (Moore, Strang, Schwartz, & Braddock, 1988). Adding costs of Chapter 1 and other categorical programs, it is clear that the total investment in such programs is substantial. Laws, regulations, and court orders have put budgets for categorical programs largely beyond local control, especially in urban school districts where class action court suits have magnified affects on programs and budgets and reduced local controls.

There are continuing calls for still more categorical programs (e.g., to serve children who are autistic or those with attention deficit disorders). But there are also calls for removal of many of the walls between categorical programs and between them and general education (California Education Connection 1990; Felix, Hertlein, McKenna, & Rayborn, 1987; Rueda, 1989), making this a critical time for reexamination of this highly disjointed enterprise.

These are some of the common criticisms and issues concerning categorical classifications and placement practices:

Resistance and resentment concerning child labeling and segregation. Perhaps the clearest case of such resistance was that of *Larry P. v Riles* (1972), which involved an African American child, labeled as having mental retardation and enrolled a special class in San Francisco. Court action initiated by parents led to a chain of decision, one by the California State Board of Education to ban the use of intelligence tests for purposes of child classification, which, in turn, caused a strong decline in rates of classifying children as having mental retardation.

Neglect of early efforts for prevention of learning and behavior problems. In special education it is common to require that emotional problems be *severe* before a child is eligible for special help. Also, children qualified as having learning disabilities are required to show a large discrepancy between expectations for learning and actual learning. Such requirements limit the number of children qualifying for special education and cause delays in providing special help over months and years during which problems grow and the likelihood of recovery declines. Recently, a promising movement in early education for children with disabilities has been

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advanced that promises better results. One by the California State Board of Education to ban the use of intelligence tests for purposes of child classification, which, in turn, caused a strong decline in rates of classifying children as having mental retardation.

Proceduralism: Excesses of regulatory processes. "Paperwork" and related regulations associated with categorical programs have become major problems for teachers. State and federal program monitors often seem to be more interested in what goes into file cabinets than in observing what goes on in classrooms. This is to say that attention to procedures too often surpasses in importance attention to learning by children. In our view, the categorical programs now present an extreme case of the twin problems of disjointedness and proceduralism (Reynolds & Wang 1983).

Lack of coordination among programs. A favored arrangement in categorical programs currently is to use "pullout" procedures. In such cases children considered to need special help are enrolled for part of the school day in general education classes, then "pulled out" for placement in a categorical program or a separate "resource room," managed by a "special" teacher, for other parts of the day. An obvious requirement in such cases is the coordination of programs by the general education and special education teachers. Studies show, however, that "pullout" programs are most often uncoordinated and that students enrolled in them often receive less instruction in areas of concern (e.g. help in reading) than they would have received by remaining in their general classes (Allington & McGill-Franzer, 1989; Haynes & Jenkins, 1986).

Misuse of specialists such as psychologists. In many school districts, school psychologists have been forced into narrow version of their profession just to give tests and allocate students to categorical programs. National associations of psychologists have called urgently for changes in present practices and for opportunities to deliver a broader version of psychology in the schools (Dwyer, 1994; Graden, Zims, & Curtis, 1988; National Association of School Psychologists, 1985).

Many of the programs are not working. The evidence concerning outcomes of special programs is equivocal at best and often quite negative. This is especially true for programs that relate to problems of "learning rates" (programs for those with mild retardation or with learning disabilities, for poor children, etc.) (Commission on Chapter I, 1992; Gerber &Semmel, 1984).

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In addition to the foregoing overview, the remainder of the special edition of *Education and Urban Society* edited by Zetlin et al. (1995) focuses on promising approaches and challenges in responding to student diversity.

Questioning the wisdom of the school systems' policy to design special and segregating programs for students who have difficulty learning, Marleen C. Pugach and Barbara L. Seidl argue that such programs focus on within-child deficits, keep students apart from their peers, and lower teacher expectations. The authors make the case for (a) redesigning *urban schools* in ways that allow natural variation to be managed within an inclusive context and (b) developing *teacher preparation programs* in which courses of study focus on enhancing educators' capacity for working with diverse learners.

Concerned with over reliance on formal assessment procedures for classifying students, the article by David J. Heistad and Maynard C. Reynolds tells of application of *20/20 Analysis,* a simple plan, to identify the extent of academic and related services needs of students.

Schools alone often do not have the resources or the expertise to proceed with comprehensive reform. But school-university partnerships, as detailed in the article by Andrea G. Zetlin and Elaine MacLeod, can provide the supportive infrastructure and serve as catalysts for change. Combining the technical expertise of university faculty and practical understandings of school staff, parents, and community agency personnel, a case study is presented of a schoolwide change effort that included curricula and instructional reform, opportunities for greater family involvement and integration of school and community resources.

Of special challenge to reformers are middle schools and the magnitude of discipline problems that school staff must contend with. The article by H. Jerome Freiberg, T. A. Stein, and Gale Parker presents an analysis of discipline referral data collected in an urban middle school and discusses impact in terms of time and resources devoted to discipline at the expense of learning. The authors describe a strategic plan for creating more responsible learners.

The article by Shernaz B. Garcia, Cheryl Y. Wilkinson, and Alba A Ortiz presents an ecological model for examining the educational and familial contexts that influence achievement of language minority students. The framework outlines conceptual and philosophical bases to serve as guiding principles for urban school reform efforts committed to developing multicultural pluralistic environments where all students can learn.

Concerned about the misdiagnosis of language minority students for special education programs and their lack of academic progress once placed. Nadeen T. Ruiz and Richard A. Figueroa describe a longitudinal research project to introduce holistic-constructivistic pedagogy into bilingual special education classrooms.

Finally, the article by Margaret C. Wang, Jane Oates, and Nancy Weishew argues for the development of school wide reform plans derived from research on individual differences in learning and effective school practices.

In all, there is consensus among the authors that major conceptual and structural changes are called for in the ways in which schools respond to the diversity of student needs.

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Using Existing Supports in Inclusive Classrooms and Schools

Three documents included on the next five pages highlight the importance of rethinking how existing resources are deployed to ensure the success of inclusion policies.

One is an excerpt from a 1998 article. It includes a useful table for thinking about natural support categories and strategies.

The second document outlines the range of interveners who can play a role in ensuring inclusion is effective.

Finally, there is a three page worksheet that can be used as a planning activity at a school to identify how available staff can be deployed to cover basic areas of concern related to school-wide approaches.

A. Natural Support Categories and Strategies

B. Types of Interveners

C. Worksheet for Pupil Personnel Staff

The goal of this article is to help practitioners look at their resources in a new way, identifying supports that may already exist but are not currently being used – such as other staff members.

Developing an inclusive education program can be difficult. Teachers and administrators must overcome many barriers, such as these:

- Philosophical barriers (whether these kids belong here).
- Logistical barriers (who goes where for what class).
- Personal barriers (who is going to teach these students, and what the kids need to learn).

Developing an inclusive program at the secondary level adds these barriers the challenges of contending with departmentalization, minimum competency testing, and graduation requirements (Ferguson, Meyer, Jeanchild, Juniper, & Zingo, 1992; Schumaker & Deshler, 1995). Given this scenario, it is not surprising that many general high school educators panic when they learn that a student with special needs is going to be in their classroom.

Perhaps the best way for general educators to approach the inclusion and support of students with disabilities is to do so in the same way they would approach the support of a student *without* disabilities. What are the resources that they already use to provide their students with needed support? What are some of the resources that they know exist, but have not used? These resources, called natural supports, include staff member roles, curriculum and instruction, time ,space, parents, and peers.

From: The Time-Space Continuum: Using Natural Support in Inclusive Classrooms. By Mey Grigal (1998). Teaching Exceptional Children, 30, 44-51.

Natural Support Categories and Strategies

Staff Member Roles	Curriculum and Instruction	Time	Space	Parents	Peers
Flexibility is necessary to implement new ideas and to let go of past practices. Teaming can create shared goals and provide an opportunity to access information from colleagues. Use core content teachers and ESL specialists as resources on the curriculum. Define roles clearly so that collaboration and team teaching will be successful.	Cooperative learning activities require good role models of cooperation among teachers. Infusion of disability and diversity-awareness activities help students to accept and respect differences. Modifications to a curriculum may only require an adjustment of your expectations. Techniques that have worked for students without disabilities may be successful with students with disabilities; try them.	Seek creative ways to collaborate with colleagues through mailboxes or brief biweekly meetings. Extra time for tests and assignments is a simple way to meet the needs of some students. Anticipating scheduling conflicts will give students more class options and teachers more time to prepare for them. Acknowledging the time constraints of special educators and trying to meet them half-way may lead to improved relations and collaboration.	Consider how the layout of the classroom can be used to benefit those with attention difficulties. A cooling-off area or system can be created for students who require it to regain self-control. The placement of students with special needs will affect how they are perceived by peers; don't clump them. Whenever possible, use an instructional assistance for all students instead of only for those with disabilities.	Parents can serve as guest speakers during disability awareness activities. Parents may know what has and has not worked for their child in the past. Parents of students in both general and special education can offer insight to one another. Information on special services systems or agencies for students with disabilities can be provided by parents.	Students-assistance programs help students both with and without special needs. Peer tutoring allows for one-to-one assistance with minimal teacher involvement. Informal peer interdependence may lead to increased social network. Cooperative learning activities promote respect and interdependence between students.

Types of interveners who might play primary or secondary roles in counseling, psychological, and social service activity

Instructional professionals
(e.g., regular classroom teachers, special education staff, health educators, classroom resource staff and consultants)

Health office professionals
(e.g., nurses, physicians, health educators, consultants)

Counseling, psychological and social work professionals
(e.g., counselors, health educators, psychologists, psychiatrists, psychiatric nurses, social workers, consultants)

Itinerant therapists
(e.g., art, dance, music, occupational, physical, speech-language-hearing, and recreation therapists; psychodramatists)

Personnel-in-training for the above roles

Others
- Aides
- Classified staff (e.g., clerical and cafeteria staff, custodians, bus drivers)
- Paraprofessionals
- Peers (e.g., peer/cross-age counselors and tutors, mutual support and self-help groups)
- Recreation personnel
- Volunteers (professional/paraprofessional/nonprofessional)

Worksheet

Exploring Some Broad Implications of Inclusion for Pupil Personnel Staff

Areas of School Concern	Additional Concerns Related to Inclusion (Increased need for addressing expanded range of individual differences and problems)	Implications for Staffing
Classroom-Focused Enabling	Expanded attention to *capacity-building* of teachers, paraeducators, volunteers, etc. so that classrooms are better equipped to provide *personalized instruction* and *address problems in a caring manner.* Examples of added concerns • understanding the nature of specific disabilities • creating small classes within big ones • in-class academic assistance and support/guidance for students • social support mechanisms • strategies for responding to group dynamics and interpersonal conflicts • advocacy for individual students • authentic assessment	
Crisis response/ prevention	Expanded attention in *planning* to address special needs of disabled students and *capacity-building* of crisis response personnel so they are better equipped to provide *support and guidance during a crisis*, will *appropriately follow-up* afterwards, and will design prevention efforts that account for students with disabilities. Examples of added concerns • understanding the nature of specific disabilities • integrating various policies and implementation plans • planning for additional supports both during crises and for follow-up debriefing and care • modifying prevention strategies to accommodate full range of students (e.g., human relations and mediation programs	

Support for Transitions	Expanded attention in *planning* to address special needs of disabled students and *capacity-building* of those providing transition activities so they are better equipped to account for students with disabilities. Examples of added concerns • understanding the nature of specific disabilities • having appropriate social support and physical accommodations as the student(s) make any transition into a new program, activity, or setting, and go one difficult task to another (included here are concerns about going to and from school, recreation and enrichment opportunities) • restoring any needed services that may be lost in moving from special education to regular classes and applying 504 accommodations • school to work/career options	
Home Involvement in Schooling	Expanded attention in *planning* to address special needs of disabled students and *capacity-building* of those providing home involvement activities so they are better equipped to account for students with disabilities and their families. Examples of added concerns • understanding the nature of specific disabilities and its impact on families • modifications of homework • additional ways home can support school's efforts with youngster • education programs for those in the home (including siblings) so they can better support youngster's development and functioning • mutual support and respite programs for family members	

Student and Family Assistance	Expanded attention in *planning* to provide services needed by disabled students and their family and for *capacity-building* of those providing such services. Examples of added concerns • understanding the nature of specific disabilities and its impact on families • ensuring referral systems are in place and not misused • ensuring all interventions are coordinated and that there is effective management of care for all clients (including participation in systems of care initiatives) • expanding the range of school-based and school-linked services	
Community Involvement (including volunteers)	Expanded attention in *planning* to involve community resources needed by disabled students and their family and for *capacity-building* of those involved. Examples of added concerns • understanding the nature of specific disabilities and its impact on families • recruiting businesses that will include students with disabilities in mentoring and job opportunities • outreach to agencies and other resources to encourage their accommodation of students with disabilities • recruitment of parent volunteers and others who understand and want to work with students with disabilities	

Beyond Placement in the Least Restrictive Environment: The Concept of Least Intervention Needed and the Need for a Continuum of Community-School Programs/Services

When professionals attempt to ameliorate problems, standards for good practice call on them to prescribe as much but no more intervention than is necessary. This is essential because interventions can be costly -- financially and in terms of potential negative consequences.

Of course, the ability to provide what is necessary depends on the availability of a full array of appropriate and accessible interventions. However, even if one has the good fortune to be able to prescribe from a full array of interventions, good practice requires using an intervention only when it is necessary and the benefits significantly outweigh the costs. (Obviously, dilemmas arise regarding costs and benefits for and according to whom.)

Least Intervention Needed

The desire to meet needs in ways that ensure that benefits outweigh costs (financial and otherwise) makes the concept of *least intervention needed* a fundamental intervention concern. The concept of using the least intervention needed (and the related notion of placement in the least restrictive environment) find support in "the principle of normalization"-- which is associated with antilabelling, mainstreaming, and deinstitutionalization policies[1].

First and foremost, least intervention needed emphasizes the intent to do what is *needed.* At the same time, the adjective "least" reflects the recognition that any intervention

- is an interference into the affairs of others (can be intrusive, disruptive, restrictive)
- consumes resources
- may produce serious negative outcomes.

Thus, translated into an intervention guideline, the concept can be stated as follows: *In ensuring that needs for assistance are met, do not interfere with an individual's opportunity for a normal range of experiences more than is absolutely necessary.*

For example, if an individual with emotional problems can be helped effectively at a community agency, this is seen as a better option than placing the person in a mental hospital. For special education populations, when a student with learning or behavior problems can be worked with effectively in a regular classroom, placement in a special education class is inappropriate. The concept of least intervention needed is reflected in laws that protect individuals from removal from the "mainstream" without good cause and due process. Such legislation and associated regulations reflect concern that disruptive or restrictive interventions can produce negative effects, such as poor self-concept and social alienation; in turn, these effects may narrow immediate and future options and choices, thereby minimizing life opportunities.

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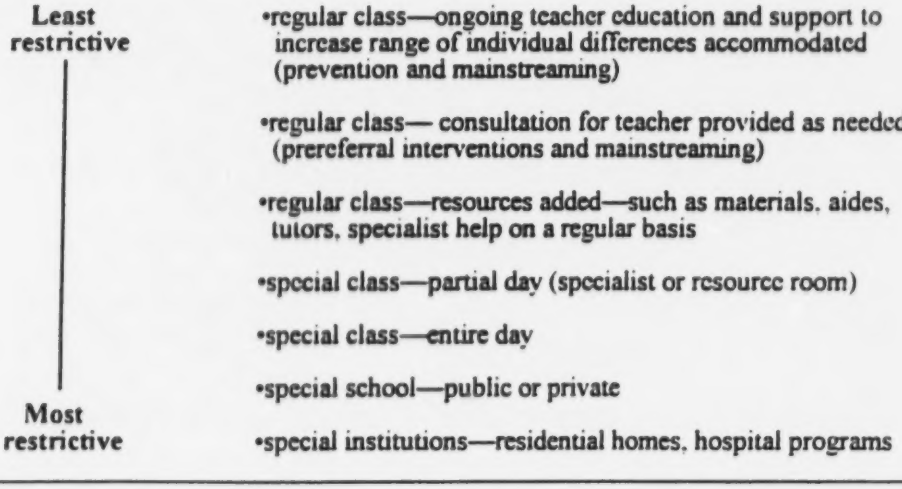
[1] On deinstitutionalization and the principle of normalization, see N.E. Bank-Mikkelsen (1976). Administrative normalizing. *S.A.-Nyt. 14*, 3–6 and W. Wolfensberger (1972). *The principle of normalization in human services*. Toronto: National Institute on Mental Retardation.

The special education example illustrates the difficulty in applying the principle of least intervention needed. Because of legislation and related regulations in the United States, the concept of least intervention needed quickly became embroiled with demands that (a) schools ensure availability and access to a continuum of alternative placements for students with disabilities and (b) students be placed in the least restrictive environment (LRE). By consensus, the least restrictive placement was described as keeping people in normal situations and using special assistance only to the degree necessary. Thus, placement in a special class is seen as somewhat more restrictive than keeping the individual in a regular class. Full-day placement in a special class is viewed as even more restrictive, and assignment to a special school or institution is even a more restrictive placement (see below). Similar degrees of restrictiveness are assignied in categorizing differences in residential arrangements and vocationally-oriented training programs.

Example: Continuum of Placements for Schooling Conceived as Ranging from Least to Most Restrictive


Least restrictive
•regular class—ongoing teacher education and support to increase range of individual differences accommodated (prevention and mainstreaming)
•regular class— consultation for teacher provided as needed (prereferral interventions and mainstreaming)
•regular class—resources added—such as materials, aides, tutors, specialist help on a regular basis
•special class—partial day (specialist or resource room)
•special class—entire day
•special school—public or private
Most restrictive
•special institutions—residential homes, hospital programs

Obviously, there are interpretative and administrative problems related to such a one dimensional approach to a complex concept such as providing the least intervention needed. A setting designated as least restrictive may lead to extreme future restrictions with respect to an individual's life opportunities if the setting cannot meet the individual's needs. (Note: The assumption often has been made that the least restrictive environment is also the most effective.)

A particular concern in applying the least restrictive environment guideline arises because administrative factors such as financial support and program availability play significant roles in intervention decisions. At times, for example, placements are approached as an administrative rather than a treatment arrangement. When this occurs, individuals are shifted from one setting to another without significant attention to whether the new setting can provide appropriate assistance. Often placement in a setting (regular or special) works administratively; however, if the setting is not capable of meeting individuals' special needs, clearly it is not good practice. In the past, such poor practice often undermined mainstreaming efforts and will certainly plague inclusion initiatives. Obviously, the emphasis on providing *least intervention* has not ensured that *needs* are met. That is why the first and foremost emphasis must be on ensuring needs can be addressed and in ways that produce benefits that outweigh costs.

Once one escapes from the debate over *where* a youngster should be taught, the concern shifts to four fundamental factors that must be considered in meeting students' learning, behavioral, and emotional needs and doing so with the least intervention:

- Is there a full array of programs and services designed to address factors interfering with learning and teaching? (See Figure 1.)
- Is there an appropriate curriculum (including a focus on areas of strength and weakness -- including prerequisites that may not have been learned, underlying factors that may be interfering with learning, and enrichment opportunities)?
- Do staff have the ability to personalize instruction/structure teaching in ways that account for the range of individual differences and disabilities in the classroom (accounting for differences in *both* motivation and capability and implementing special practices when necessary)?
- Does the student-staff ratio ensures the necessary time required for personalizing instruction, implementing special practices, and providing enrichment?

Needed: A Comprehensive, Multifaceted, Integrated Continuum of Programs/Services

As suggested above, for learning in the classroom and home to be effective for some individuals, there must be a full array of programs and services designed to address factors that interfere with learning and teaching. From this persepctive, the concept of *least intervention needed* calls for (1) ensuring availability and access to *a comprehensive, integrated continuum of community and school programs/services*, and (2) only using specialized interventions when they are needed -- and only to the degree they are needed and appropriate.

Figures 2-4 outline the nature and scope of the type of continuum that is essential in designated geographic areas (e.g., local catchment areas) for addressing barriers to student learning. The framework for such a continuum emerges from analyses of social, economic, political, and cultural factors associated with the problems of youth and from reviews of promising practices (including peer and self-help strategies). It encompasses a holistic and developmental emphasis. Such an approach requires a significant range of multifaceted programs focused on individuals, families, and environments. Implied is the importance of using the least restrictive and nonintrusive forms of intervention required to address problems and accommodate diversity. With respect to concerns about integrating activity, the continuum of community and school interventions underscores that interprogram connections are essential on a daily basis and over time. That is, the continuum must include *systems* of *prevention*, *systems* of *early intervention* to address problems as soon after onset as feasible, and *systems of care* for those with chronic and severe problems. And each of these systems must be connected seamlessly.

The point is: When the focus is on the concept of *least intervention needed* (rather than LRE) and the concept is approached first from the perspective of need, the primary concern is not about placement, but about a necessary continuum of multifaceted and integrated programs and services for preventing and correcting problems effectively. Moreover, the focus is not just on the individual, but on improving environments so that they do a better job with respect to accounting for individual differences and disabilities. And when the continuum is conceived in terms of integrated *systems* of *prevention* and *early intervention*, as well as *systems of care*, many problems that now require special education can be prevented, thereby ensuring enhanced attention to persons with special needs.

The above material is extrapolated from the following references:

H.S. Adelman (1996). *Restructuring education support services: Toward the concept of an enabling component.* Kent, OH: American School Health Association.

H.S. Adelman & L. Taylor, L. (1993). *Learning problems and learning disabilities: Moving forward.* Pacific Grove, CA: Brooks/Cole.

H.S. Adelman & L. Taylor (1994). *On understanding intervention in psychology and education.* Westport, CT: Praeger.

H.S. Adelman & L. Taylor (1997). Addressing barriers to learning: Beyond school-linked services and full service schools. *American Journal of Orthopsychiatry, 67,* 408-421..

Center for Mental Health in Schools (1996). *Policies and practices for addressing barriers to student learning: Current status and new directions.* Los Angeles, CA: Author. Available by contacting the Center at the Dept. of Psychology, UCLA, Los Angeles, CA 90095-1563.

ABOUT THE CENTER FOR MENTAL HEALTH IN SCHOOLS at UCLA

The Center is co-directed by Howard Adelman and Linda Taylor and operates under the auspices of the School Mental Health Project, Dept. of Psychology, UCLA. The Center is one of two national centers funded by the U.S. Department of Health and Human Services (Public Health Service, Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health). For an overview of resources available from the Center, write c/o Dept. of Psychology, UCLA, Box 951563, Los Angeles, CA 90095-1563 or call (310) 825-3634 or use the internet to scan the website http://smhp.psych.ucla.edu

Figure 1. A model for an enabling component at a school site.

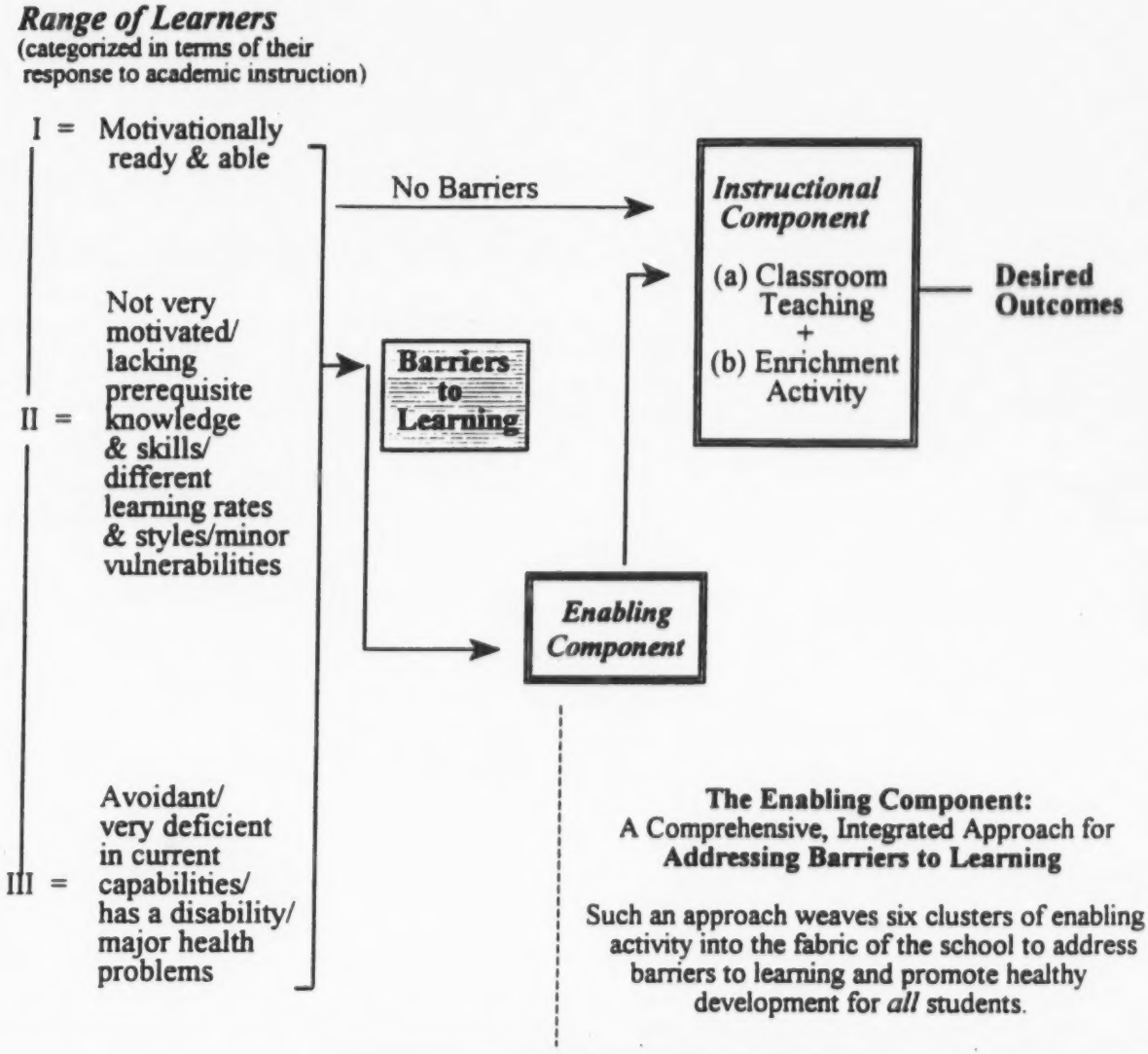

Range of Learners
(categorized in terms of their response to academic instruction)
I = Motivationally ready & able
II = Not very motivated/ lacking prerequisite knowledge & skills/ different learning rates & styles/minor vulnerabilities
III = Avoidant/ very deficient in current capabilities/ has a disability/ major health problems
No Barriers
Barriers to Learning
Instructional Component
(a) Classroom Teaching
+
(b) Enrichment Activity
Desired Outcomes
Enabling Component
The Enabling Component:
A Comprehensive, Integrated Approach for Addressing Barriers to Learning
Such an approach weaves six clusters of enabling activity into the fabric of the school to address barriers to learning and promote healthy development for all students.
Classroom-Focused Enabling
Crisis/ Emergency Assistance & Prevention
Student & Family Assistance
Resource Coordination
Support for Transitions
Community Outreach/ Volunteers
Home Involvement in Schooling

Figure: Addressing barriers to student learning: A continuum of five fundamental areas for analyzing policy and practice.

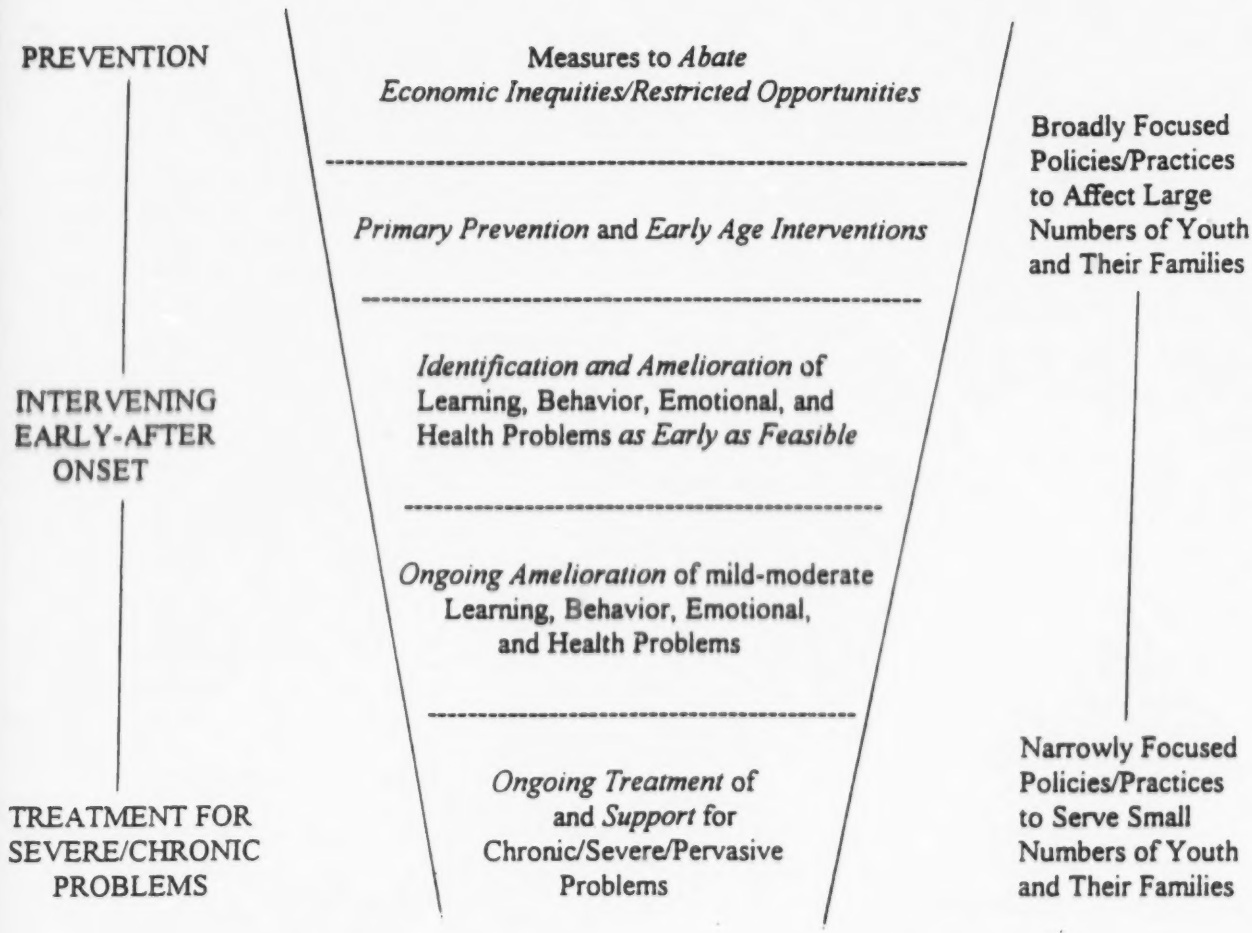

PREVENTION
INTERVENING EARLY-AFTER ONSET
TREATMENT FOR SEVERE/CHRONIC PROBLEMS
Measures to *Abate* *Economic Inequities/Restricted Opportunities*
Primary Prevention and *Early Age Interventions*
Identification and Amelioration of Learning, Behavior, Emotional, and Health Problems *as Early as Feasible*
Ongoing Amelioration of mild-moderate Learning, Behavior, Emotional, and Health Problems
Ongoing Treatment of and *Support* for Chronic/Severe/Pervasive Problems
Broadly Focused Policies/Practices to Affect Large Numbers of Youth and Their Families
Narrowly Focused Policies/Practices to Serve Small Numbers of Youth and Their Families

Figure 3. From Primary Prevention to Treatment of Serious Problems: A Continuum of Community-School Programs

Intervention Continuum	*Examples of Focus and Types of Intervention* (Programs and services aimed at system changes and individual needs)
Primary prevention	1. *Public health protection, promotion, and maintenance to foster opportunities, positive development, and wellness* • economic enhancement of those living in poverty (e.g., work/welfare programs) • safety (e.g., instruction, regulations, lead abatement programs) • physical and mental health (incl. healthy start initiatives, immunizations, dental care, substance abuse prevention, violence prevention, health/mental health education, sex education and family planning, recreation, social services to access basic living resources, and so forth)
	2. *Preschool-age support and assistance to enhance health and psychosocial development* • systems' enhancement through multidisciplinary team work, consultation, and staff development • education and social support for parents of preschoolers • quality day care • quality early education • appropriate screening and amelioration of physical and mental health and psychosocial problems
Early-after-onset intervention	3. *Early-schooling targeted interventions* • orientations, welcoming and transition support into school and community life for students and their families (especially immigrants) • support and guidance to ameliorate school adjustment problems • personalized instruction in the primary grades • additional support to address specific learning problems • parent involvement in problem solving • comprehensive and accessible psychosocial and physical and mental health programs (incl. a focus on community and home violence and other problems identified through community needs assessment)
	4. *Improvement and augmentation of ongoing regular support* • enhance systems through multidisciplinary team work, consultation, and staff development • preparation and support for school and life transitions • teaching "basics" of support and remediation to regular teachers (incl. use of available resource personnel, peer and volunteer support) • parent involvement in problem solving • resource support for parents-in-need (incl. assistance in finding work, legal aid, ESL and citizenship classes, and so forth) • comprehensive and accessible psychosocial and physical and mental health interventions (incl. health and physical education, recreation, violence reduction programs, and so forth) • Academic guidance and assistance • Emergency and crisis prevention and response mechanisms
	5. *Other interventions prior to referral for intensive, ongoing targeted treatments* • enhance systems through multidisciplinary team work, consultation, and staff development • short-term specialized interventions (including resource teacher instruction and family mobilization; programs for suicide prevention, pregnant minors, substance abusers, gang members, and other potential dropouts)
Treatment for severe/chronic problems	6. *Intensive treatments* • referral, triage, placement guidance and assistance, case management, and resource coordination • family preservation programs and services • special education and rehabilitation • dropout recovery and follow-up support • services for severe-chronic psychosocial/mental/physical health problems

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Figure 4. Interconnected systems for meeting the needs of all students

Aims:

To provide a CONTINUUM OF SCHOOL AND COMMUNITY PROGRAMS & SERVICES

To ensure use of the LEAST INTERVENTION NEEDED

School **Resources**
(facilities, stakeholders, programs, services)

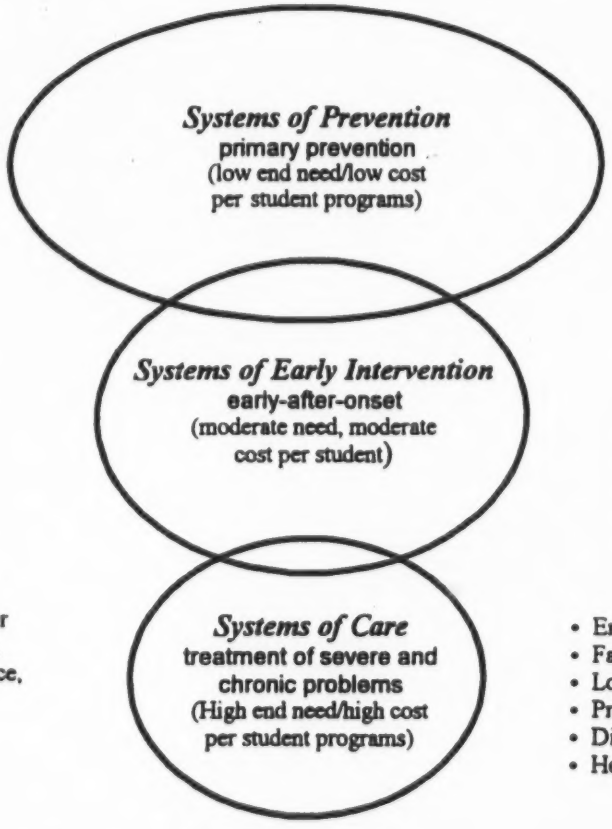
Examples:

- General health education
- Drug and alcohol education
- Support for transitions
- Conflict resolution
- Parent involvement

Community **Resources**
(facilities, stakeholders, programs, services)

Examples:

- Public health & safety programs
- Prenatal care
- Immunizations
- Recreation & enrichment
- Child abuse education


Systems of Prevention
primary prevention
(low end need/low cost per student programs)
Systems of Early Intervention
early-after-onset
(moderate need, moderate cost per student)
Systems of Care
treatment of severe and chronic problems
(High end need/high cost per student programs)

- Pregnancy prevention
- Violence prevention
- Dropout prevention
- Learning/behavior accommodations
- Work programs

- Early identification to treat health problems
- Monitoring health problems
- Short-term counseling
- Foster placement/group homes
- Family support
- Shelter, food, clothing
- Job programs

- Special education for learning disabilities, emotional disturbance, and other health impairments

- Emergency/crisis treatment
- Family preservation
- Long-term therapy
- Probation/incarceration
- Disabilities programs
- Hospitalization

Systemic collaboration* is essential to establish interprogram connections on a daily basis and over time to ensure seamless intervention within each system and among *systems* of *prevention*, *systems* of *early intervention*, and *systems of care*.

*Such collaboration involves horizontal and vertical restructuring of programs and services
(a) between jurisdictions, school and community agencies, public and private sectors; among schools; among community agencies;
(b) with jurisdictions, school districts, and community agencies (e.g., among departments, divisions, units, schools, clusters or schools)

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We hope you found this to be a useful resource. There's more where this came from!

This packet has been specially prepared by our Clearinghouse. Other Introductory Packets and materials are available. Resources in the Clearinghouse are organized around the following categories.

CLEARINGHOUSE CATEGORIES

Systemic Concerns

- Policy issues related to mental health in schools
- Mechanisms and procedures for program/service coordination
  - Collaborative Teams
  - School-community service linkages
  - Cross disciplinary training and interprofessional education
- Comprehensive, integrated programmatic approaches (as contrasted with fragmented, categorical, specialist oriented services)
- Issues related to working in rural, urban, and suburban areas
- Restructuring school support service
  - Systemic change strategies
  - Involving stakeholders in decisions
  - Staffing patterns
  - Financing
  - Evaluation, Quality Assurance
  - Legal Issues
- Professional standards
- Other System Topics: _____

Programs and Process Concerns:

- Clustering activities into a cohesive, programmatic approach
  - Support for transitions
  - Mental health education to enhance healthy development & prevent problems
  - Parent/home involvement
  - Enhancing classrooms to reduce referrals (including prereferral interventions)
  - Use of volunteers/trainees
  - Outreach to community
  - Crisis response
  - Crisis and violence prevention (including safe schools)
- Staff capacity building & support
  - Cultural competence
  - Minimizing burnout
- Interventions for student and family assistance
  - Screening/Assessment
  - Enhancing triage & ref. processes
  - Least Intervention Needed
  - Short-term student counseling
  - Family counseling and support
  - Case monitoring/management
  - Confidentiality
  - Record keeping and reporting
  - School-based Clinics
- Other program and process concerns: _____

Psychosocial Problems

- Drug/alcoh. abuse
- Depression/suicide
- Grief
- Dropout prevention
- Learning Problems
- Pregnancy prevention/support
- Eating problems (anorexia, bulim.)
- Physical/Sexual Abuse
- Neglect
- Gangs
- Self-esteem
- Relationship problems
- Anxiety
- Disabilities
- Gender and sexuality
- Reactions to chronic illness
- School Adjustment (including newcomer acculturation)
- Other Psychosocial problems: _____